

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00084821	2 Total pages filed: 218
3 COMMITTEE NAME Rideshare 2 Vote			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/08/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 803648 DALLAS, TX 75380		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Paola NICKNAME LAST SUFFIX Kovich		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4808 Haverwood Lane Apt. 435 Dallas, TX 75287		
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 803648 Dallas, TX 75380		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 364-3570		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year 04/24/2025 THROUGH Month Day Year 06/30/2025		
11 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Rideshare 2 Vote		13 Filer ID (Ethics Commission Filers) 00084821
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
	15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 43,778.32
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 143,361.49
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 309,983.16
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
16 AFFIDAVIT <p>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.</p> <p style="text-align: right;">Ms. Paola Kovich _____ Signature of Campaign Treasurer</p> <p>AFFIX NOTARY STAMP / SEAL ABOVE</p> <p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p> <p>_____ Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath</p>		

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 218

17 COMMITTEE NAME Rideshare 2 Vote		18 Filer ID (Ethics Commission Filers) 00084821
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 43,778.32
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 143,361.49
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 910.45

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/205 Rpt: 4/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Achey, Michael <hr/> 6 Contributor address; City; State; Zip Code North Easton, MA 02356	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) md		9 Employer (See Instructions) compass medical
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Achey, Michael <hr/> Contributor address; City; State; Zip Code North Easton, MA 02356	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) md		Employer (See Instructions) compass medical
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Achey, Michael <hr/> Contributor address; City; State; Zip Code North Easton, MA 02356	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) md		Employer (See Instructions) compass medical
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Sandra <hr/> Contributor address; City; State; Zip Code Durham, NC 27701	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions) self
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Sandra <hr/> Contributor address; City; State; Zip Code Durham, NC 27701	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/205 Rpt: 5/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Leonard <hr/> 6 Contributor address; City; State; Zip Code Deerfield, IL 60015	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adelsberger, Peter <hr/> Contributor address; City; State; Zip Code Suffield, CT 06078	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Case Manager/Mental Health		Employer (See Instructions) Hartford Hospital
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adler, Rabbi Rachel <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15217	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akins, Robert <hr/> Contributor address; City; State; Zip Code Longmont, CO 80501	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albritton, Mary <hr/> Contributor address; City; State; Zip Code Sarasota, FL 34235	Amount of Contribution (\$) \$20.23
Principal occupation / Job title (See Instructions) Comptroller		Employer (See Instructions) Your Farm and Garden

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/205 Rpt: 6/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albritton, Mary <hr/> 6 Contributor address; City; State; Zip Code Sarasota, FL 34235	7 Amount of Contribution (\$) \$20.23
8 Principal occupation / Job title (See Instructions) Comptroller		9 Employer (See Instructions) Your Farm and Garden
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ambler, Anne <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20902-1443	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ash, Arlene <hr/> Contributor address; City; State; Zip Code Boston, MA 02115	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Health Care Statistics		Employer (See Instructions) UMass Medical School
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ash, Arlene <hr/> Contributor address; City; State; Zip Code Boston, MA 02115	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Health Care Statistics		Employer (See Instructions) UMass Medical School
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ash, Arlene <hr/> Contributor address; City; State; Zip Code Boston, MA 02115	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Health Care Statistics		Employer (See Instructions) UMass Medical School

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/205 Rpt: 7/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashley, Charlene <hr/> 6 Contributor address; City; State; Zip Code Elk Grove, CA 95758	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashley, Charlene <hr/> Contributor address; City; State; Zip Code Elk Grove, CA 95758	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashley, Charlene <hr/> Contributor address; City; State; Zip Code Elk Grove, CA 95758	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkinson, Nathan <hr/> Contributor address; City; State; Zip Code Santa Cruz, CA 95060	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) Palo Alto Medical Foundation
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkinson, Nathan <hr/> Contributor address; City; State; Zip Code Santa Cruz, CA 95060	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) Palo Alto Medical Foundation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/205 Rpt: 8/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREW, CATHLEEN <hr/> 6 Contributor address; City; State; Zip Code Modesto, CA 95355	7 Amount of Contribution (\$) \$20.25
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Backman, Rebecca <hr/> Contributor address; City; State; Zip Code Andover, MA 01810	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baechle, Ralph <hr/> Contributor address; City; State; Zip Code Davenport, IA 52807	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baechle, Ralph <hr/> Contributor address; City; State; Zip Code Davenport, IA 52807	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banks, Hannah <hr/> Contributor address; City; State; Zip Code Newton, MA 02459	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/205 Rpt: 9/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbieri, Neil 6 Contributor address; City; State; Zip Code Fairfax, VA 22033	7 Amount of Contribution (\$) \$20.25
8 Principal occupation / Job title (See Instructions) Senior Manager Research		9 Employer (See Instructions) Venable LLP
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beauvais, Carol Contributor address; City; State; Zip Code Northampton, MA 01060	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) psychologist		Employer (See Instructions) Carol Beauvais PhD
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beauvais, Carol Contributor address; City; State; Zip Code Northampton, MA 01060	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) psychologist		Employer (See Instructions) Carol Beauvais PhD
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beer, Avery Contributor address; City; State; Zip Code Bloomfield, NY 14469	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beer, Avery Contributor address; City; State; Zip Code Bloomfield, NY 14469	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/205 Rpt: 10/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Sharon <hr/> 6 Contributor address; City; State; Zip Code Oak Ridge, TN 37830	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Sharon <hr/> Contributor address; City; State; Zip Code Oak Ridge, TN 37830	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellone, Mary <hr/> Contributor address; City; State; Zip Code Lacombe, TX 75089	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) St Tammany Parish Public Schools
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berliss, Jeremy <hr/> Contributor address; City; State; Zip Code Portland, OR 97211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Multnomah education service district
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berliss, Jeremy <hr/> Contributor address; City; State; Zip Code Portland, OR 97211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Multnomah education service district

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/205 Rpt: 11/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernard-Pearl, Lisa <hr/> 6 Contributor address; City; State; Zip Code Albany, CA 94706	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernard-Pearl, Lisa <hr/> Contributor address; City; State; Zip Code Albany, CA 94706	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernhard, Keith <hr/> Contributor address; City; State; Zip Code Toledo, OH 43607	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernhard, Keith <hr/> Contributor address; City; State; Zip Code Toledo, OH 43607	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernhard, Keith <hr/> Contributor address; City; State; Zip Code Toledo, OH 43607	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/205 Rpt: 12/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernhard, Keith <hr/> 6 Contributor address; City; State; Zip Code Toledo, OH 43607	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernhard, Keith <hr/> Contributor address; City; State; Zip Code Toledo, OH 43607	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 05/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bethard, Laura <hr/> Contributor address; City; State; Zip Code Allston, MA 02134	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) publications		Employer (See Instructions) NBER
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bethard, Laura <hr/> Contributor address; City; State; Zip Code Allston, MA 02134	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) publications		Employer (See Instructions) NBER
Date 05/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bilkey, Amy W <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30328	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/205 Rpt: 13/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bilkey, Amy W <hr/> 6 Contributor address; City; State; Zip Code Atlanta, GA 30328	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Jay <hr/> Contributor address; City; State; Zip Code Virginia Beach, VA 23462	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bleakley, Rebecca <hr/> Contributor address; City; State; Zip Code Taunton, MA 02780	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bleakley, Rebecca <hr/> Contributor address; City; State; Zip Code Taunton, MA 02780	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blier, Steven <hr/> Contributor address; City; State; Zip Code New York, NY 10025	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Juilliard School

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/205 Rpt: 14/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blier, Steven <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10025	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Musician		9 Employer (See Instructions) Juilliard School
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blier, Steven <hr/> Contributor address; City; State; Zip Code New York, NY 10025	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Juilliard School
Date 04/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobrick, Elizabeth <hr/> Contributor address; City; State; Zip Code Middletown, CT 06457	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions) self
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobrick, Elizabeth <hr/> Contributor address; City; State; Zip Code Middletown, CT 06457	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions) self
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobrick, Elizabeth <hr/> Contributor address; City; State; Zip Code Middletown, CT 06457	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/205 Rpt: 15/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boland, William <hr/> 6 Contributor address; City; State; Zip Code Miami, FL 33133	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Physiologist		9 Employer (See Instructions) BodyFix Method
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boland, William <hr/> Contributor address; City; State; Zip Code Miami, FL 33133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physiologist		Employer (See Instructions) BodyFix Method
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolevice, David <hr/> Contributor address; City; State; Zip Code Philmont, NY 12565	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolevice, David <hr/> Contributor address; City; State; Zip Code Philmont, NY 12565	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowman, Sandra <hr/> Contributor address; City; State; Zip Code University Place, WA 98466	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/205 Rpt: 16/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowman, Sandra <hr/> 6 Contributor address; City; State; Zip Code University Place, WA 98466	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Not employed
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowyer, Susan <hr/> Contributor address; City; State; Zip Code Oakland, CA 94602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Caregiver		Employer (See Instructions) Martha Senger
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowyer, Susan <hr/> Contributor address; City; State; Zip Code Oakland, CA 94602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Caregiver		Employer (See Instructions) Martha Senger
Date 04/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady, Jessica <hr/> Contributor address; City; State; Zip Code Wayne, NJ 07470	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Laboratory scientist		Employer (See Instructions) Alfa Wassermann
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady, Jessica <hr/> Contributor address; City; State; Zip Code Wayne, NJ 07470	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Laboratory scientist		Employer (See Instructions) Alfa Wassermann

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/205 Rpt: 17/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady, Jessica <hr/> 6 Contributor address; City; State; Zip Code Wayne, NJ 07470	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Laboratory scientist		9 Employer (See Instructions) Alfa Wassermann
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bram, Rachel <hr/> Contributor address; City; State; Zip Code Huntington, NY 11743	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bram, Rachel <hr/> Contributor address; City; State; Zip Code Huntington, NY 11743	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bransten, Rena <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Art dealer		Employer (See Instructions) Owner
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bransten, Rena <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Art dealer		Employer (See Instructions) Owner

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/205 Rpt: 18/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brege, Ann-Marie <hr/> 6 Contributor address; City; State; Zip Code Honolulu, HI 96822	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) teacher		9 Employer (See Instructions) self
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brege, Ann-Marie <hr/> Contributor address; City; State; Zip Code Honolulu, HI 96822	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) self
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breitner, Pieter <hr/> Contributor address; City; State; Zip Code Coralville, IA 52241	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None (Retired)
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breslow Newhouse, Ellen <hr/> Contributor address; City; State; Zip Code New York, NY 10013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breslow Newhouse, Ellen <hr/> Contributor address; City; State; Zip Code New York, NY 10013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/205 Rpt: 19/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brill, Bettye 6 Contributor address; City; State; Zip Code San Francisco, CA 94115	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brill, Bettye Contributor address; City; State; Zip Code San Francisco, CA 94115	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Elaine Contributor address; City; State; Zip Code Oakland, CA 94606	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broussard, Tim Contributor address; City; State; Zip Code Rockport, TX 78382	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broussard, Tim Contributor address; City; State; Zip Code Rockport, TX 78382	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/205 Rpt: 20/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broussard, Tim <hr/> 6 Contributor address; City; State; Zip Code Rockport, TX 78382	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Gloria <hr/> Contributor address; City; State; Zip Code Bonita Springs, FL 31045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Gloria <hr/> Contributor address; City; State; Zip Code Bonita Springs, FL 34135	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Gloria <hr/> Contributor address; City; State; Zip Code Bonita Springs, FL 31045	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Gloria <hr/> Contributor address; City; State; Zip Code Bonita Springs, FL 34135	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/205 Rpt: 21/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Browning, Rufus <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94122	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) none
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Browning, Rufus <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94122	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Paul <hr/> Contributor address; City; State; Zip Code Sheffield, MA 01257	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Independent
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Paul <hr/> Contributor address; City; State; Zip Code Sheffield, MA 01257	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Independent
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bush, Jennifer <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19144	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Cooper University Healthcare

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/205 Rpt: 22/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bush, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Philadelphia, PA 19144	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Cooper University Healthcare
Date 05/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cabell, James <hr/> Contributor address; City; State; Zip Code Tyler, TX 75703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cabell, James <hr/> Contributor address; City; State; Zip Code Tyler, TX 75703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caine, Steve <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02138	Amount of Contribution (\$) \$50.25
Principal occupation / Job title (See Instructions) software development		Employer (See Instructions) Self
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Carol <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/205 Rpt: 23/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Marilyn <hr/> 6 Contributor address; City; State; Zip Code Lake Forest Park Ci, WA 98155	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Marilyn <hr/> Contributor address; City; State; Zip Code Lake Forest Park Ci, WA 98155	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Marilyn <hr/> Contributor address; City; State; Zip Code Lake Forest Park Ci, WA 98155	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campuzano, Sol-Angel <hr/> Contributor address; City; State; Zip Code Sylmar, CA 91342	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campuzano, Sol-Angel <hr/> Contributor address; City; State; Zip Code Sylmar, CA 91342	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/205 Rpt: 24/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capehart, George <hr/> 6 Contributor address; City; State; Zip Code Gastonia, NC 28054	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capehart, George <hr/> Contributor address; City; State; Zip Code Gastonia, NC 28054	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carnahan, Peggy <hr/> Contributor address; City; State; Zip Code Helotes, TX 78023	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Science Educator		Employer (See Instructions) Our Lady of the Lake Uni
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carnahan, Peggy <hr/> Contributor address; City; State; Zip Code Helotes, TX 78023	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Science Educator		Employer (See Instructions) Our Lady of the Lake Uni
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casseday, John <hr/> Contributor address; City; State; Zip Code Seattle, WA 98103	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/205 Rpt: 25/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casseday, John <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98103	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Not employed
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, David <hr/> Contributor address; City; State; Zip Code Chicago, IL 60608	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, David <hr/> Contributor address; City; State; Zip Code Chicago, IL 60608	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chew, Linda <hr/> Contributor address; City; State; Zip Code El Paso, TX 79930	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) State of Texas
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chew, Linda <hr/> Contributor address; City; State; Zip Code El Paso, TX 79930	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/205 Rpt: 26/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childers, Mr Daniel A <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60637	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Bloomberg LP
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childers, Mr Daniel A <hr/> Contributor address; City; State; Zip Code Chicago, IL 60637	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Bloomberg LP
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chrisman, Shirley <hr/> Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Systems Analyst		Employer (See Instructions) State of Texas
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chrisman, Shirley <hr/> Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$25.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christian, Lisa <hr/> Contributor address; City; State; Zip Code Denver, CO 80220	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) US Dept of Agriculture

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/205 Rpt: 27/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christian, Lisa <hr/> 6 Contributor address; City; State; Zip Code Denver, CO 80220	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) US Dept of Agriculture
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Church, Gordon <hr/> Contributor address; City; State; Zip Code Kirkland, WA 98033	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Church, Gordon <hr/> Contributor address; City; State; Zip Code Kirkland, WA 98033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Church, Gordon <hr/> Contributor address; City; State; Zip Code Kirkland, WA 98033	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Church, Gordon <hr/> Contributor address; City; State; Zip Code Kirkland, WA 98033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/205 Rpt: 28/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cipora, John <hr/> 6 Contributor address; City; State; Zip Code Palmer, MA 01069	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Springfield College
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clemons, Kenny <hr/> Contributor address; City; State; Zip Code New Rochelle, NY 10804	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clemons, Kenny <hr/> Contributor address; City; State; Zip Code New Rochelle, NY 10804	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clifton, Charles <hr/> Contributor address; City; State; Zip Code Hadley, MA 01054	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clifton, Charles <hr/> Contributor address; City; State; Zip Code Hadley, MA 01054	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/205 Rpt: 29/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coats, Michelle <hr/> 6 Contributor address; City; State; Zip Code Pacific Grove, CA 93950	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Steven <hr/> Contributor address; City; State; Zip Code Prides Crossing, MA 01965	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Steven <hr/> Contributor address; City; State; Zip Code Prides Crossing, MA 01965	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole-Ingber, Connie <hr/> Contributor address; City; State; Zip Code Oxford, CT 06478	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) rn		Employer (See Instructions) ynhh
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Veronica <hr/> Contributor address; City; State; Zip Code Floyds Knobs, IN 47119	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) HKA Marcom

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/205 Rpt: 30/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Veronica <hr/> 6 Contributor address; City; State; Zip Code Floyds Knobs, IN 47119	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Writer		9 Employer (See Instructions) HKA Marcom
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Carolyn <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94306	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Carolyn <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94306	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conner, Sheila <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77502	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conner, Sheila <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77502	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/205 Rpt: 31/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contardo, Joseph <hr/> 6 Contributor address; City; State; Zip Code Denver, CO 80203	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired Medical Social Worker		9 Employer (See Instructions) None
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contardo, Joseph <hr/> Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired Medical Social Worker		Employer (See Instructions) None
Date 05/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Jane <hr/> Contributor address; City; State; Zip Code Belvedere Tiburon, CA 94920	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Jane <hr/> Contributor address; City; State; Zip Code Belvedere Tiburon, CA 94920	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, Thomas <hr/> Contributor address; City; State; Zip Code Youngstown, OH 44509	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/205 Rpt: 32/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, Thomas <hr/> 6 Contributor address; City; State; Zip Code Youngstown, OH 44509	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code AURORA, CO 80017	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/205 Rpt: 33/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> 6 Contributor address; City; State; Zip Code Aurora, CO 80017	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code AURORA, CO 80017	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/205 Rpt: 34/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> 6 Contributor address; City; State; Zip Code Aurora, CO 80017	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruder, Peggy <hr/> Contributor address; City; State; Zip Code Aurora, CO 80017	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Lynda <hr/> Contributor address; City; State; Zip Code Seaside, CA 93955	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Database Adminstration		Employer (See Instructions) Banner Health
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Lynda <hr/> Contributor address; City; State; Zip Code Seaside, CA 93955	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Database Adminstration		Employer (See Instructions) Banner Health
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAncona, Amy <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19131	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/205 Rpt: 35/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAncona, Amy <hr/> 6 Contributor address; City; State; Zip Code Philadelphia, PA 19131	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dancona, amy <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19131	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dauerty, Barbaral <hr/> Contributor address; City; State; Zip Code Universal City, TX 78148	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Physician associate		Employer (See Instructions) Nagel Community Clinic
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dauerty, Barbaral <hr/> Contributor address; City; State; Zip Code Universal City, TX 78148	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Physician associate		Employer (See Instructions) Nagel Community Clinic
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davey, Jeffrey <hr/> Contributor address; City; State; Zip Code Jefferson, GA 30549	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/205 Rpt: 36/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davey, Jeffrey <hr/> 6 Contributor address; City; State; Zip Code Jefferson, GA 30549	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Liliane <hr/> Contributor address; City; State; Zip Code Studio City, CA 91604	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Liliane <hr/> Contributor address; City; State; Zip Code Studio City, CA 91604	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Marisa <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90041	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lighting Designer		Employer (See Instructions) CBS Studios
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Marisa <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90041	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Lighting Designer		Employer (See Instructions) CBS Studios

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/205 Rpt: 37/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Day, Henry <hr/> 6 Contributor address; City; State; Zip Code Beaverton, OR 97005	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickerman, Andrew <hr/> Contributor address; City; State; Zip Code Pacific Palisades, CA 90272	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dinda, Joel <hr/> Contributor address; City; State; Zip Code Mulliken, MI 48861	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Mildred <hr/> Contributor address; City; State; Zip Code King Coty, CA 93930	Amount of Contribution (\$) \$5.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drummond, Pamela <hr/> Contributor address; City; State; Zip Code Highlands, NC 28741	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/205 Rpt: 38/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drummond, Pamela <hr/> 6 Contributor address; City; State; Zip Code Highlands, NC 28741	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dykes, Russell <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dykes, Russell <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddison, Jonathan <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-2149	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddison, Jonathan <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660-2149	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/205 Rpt: 39/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Carol <hr/> 6 Contributor address; City; State; Zip Code Silver Spring, MD 20906	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Carol <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20906	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Carol <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20906	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Carol <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20906	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrenberg, Betsy <hr/> Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/205 Rpt: 40/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrenberg, Betsy <hr/> 6 Contributor address; City; State; Zip Code Medford, MA 02155	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrenberg, Betsy <hr/> Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrenberg, Betsy <hr/> Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrenberg, Betsy <hr/> Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrenberg, Betsy <hr/> Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/205 Rpt: 41/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ehrenberg, Betsy <hr/> 6 Contributor address; City; State; Zip Code Medford, MA 02155	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eisen, Cara <hr/> Contributor address; City; State; Zip Code New York, NY 10024	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) reading specialist		Employer (See Instructions) self
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eisen, Cara <hr/> Contributor address; City; State; Zip Code New York, NY 10024	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) reading specialist		Employer (See Instructions) self
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eisen, Cara <hr/> Contributor address; City; State; Zip Code New York, NY 10024	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) reading specialist		Employer (See Instructions) self
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engelhardt, Helen <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11210	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) educator		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/205 Rpt: 42/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engelhardt, Helen <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11210	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engelhardt, Helen <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11210	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) educator		Employer (See Instructions) none
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engelhardt, Helen <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11210	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engelhardt, Helen <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11210	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) educator		Employer (See Instructions) none
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Espo, Caryn <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90049	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/205 Rpt: 43/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estevez, Donna <hr/> 6 Contributor address; City; State; Zip Code BRADENTON, FL 34208	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estevez, Donna <hr/> Contributor address; City; State; Zip Code BRADENTON, FL 34208	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estevez, Donna <hr/> Contributor address; City; State; Zip Code BRADENTON, FL 34208	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAHRNER, MARILYN <hr/> Contributor address; City; State; Zip Code Santa Cruz, CA 95062	Amount of Contribution (\$) \$15.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAHRNER, MARILYN <hr/> Contributor address; City; State; Zip Code Santa Cruz, CA 95062	Amount of Contribution (\$) \$15.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/205 Rpt: 44/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fagerstrom, Donna <hr/> 6 Contributor address; City; State; Zip Code PELHAM, NY 10803	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Hogan Lovells US LLP
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faulhaber, Linda <hr/> Contributor address; City; State; Zip Code New York, NY 10024	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faulhaber, Linda <hr/> Contributor address; City; State; Zip Code New York, NY 10024	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feder, Susan <hr/> Contributor address; City; State; Zip Code Irvington, NY 10533	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Program Officer		Employer (See Instructions) Mellon Foundation
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feder, Susan <hr/> Contributor address; City; State; Zip Code Irvington, NY 10533	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Program Officer		Employer (See Instructions) Mellon Foundation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/205 Rpt: 45/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Betsy <hr/> 6 Contributor address; City; State; Zip Code Exeter, NH 03833	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Betsy <hr/> Contributor address; City; State; Zip Code Exeter, NH 03833	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fineman, Martha <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30308	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) law professor		Employer (See Instructions) Emory University
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finner, Douglas <hr/> Contributor address; City; State; Zip Code Alexandria, NH 03222	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Elbit Systems of America
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finner, Douglas <hr/> Contributor address; City; State; Zip Code Alexandria, NH 03222	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Elbit Systems of America

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/205 Rpt: 46/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Firestone, M. Jane <hr/> 6 Contributor address; City; State; Zip Code West Haven, CT 06516	7 Amount of Contribution (\$) \$20.25
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzgerald, Kathleen <hr/> Contributor address; City; State; Zip Code Potsdam, NY 13676	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzgerald, Kathleen <hr/> Contributor address; City; State; Zip Code Potsdam, NY 13676	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flavan, Mary <hr/> Contributor address; City; State; Zip Code Morro Bay, CA 93442	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flavan, Mary <hr/> Contributor address; City; State; Zip Code Morro Bay, CA 93442	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/205 Rpt: 47/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleischer, Rosalyn <hr/> 6 Contributor address; City; State; Zip Code Sarasota, FL 34238-5626	7 Amount of Contribution (\$) \$20.25
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Keller Williams on the Water
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foote, Sharon <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Marsha <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30305-3714	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forray, Jeanie <hr/> Contributor address; City; State; Zip Code Hadley, MA 01035	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forray, Jeanie <hr/> Contributor address; City; State; Zip Code Hadley, MA 01035	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/205 Rpt: 48/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foszcz, Sara <hr/> 6 Contributor address; City; State; Zip Code Richmond, IL 60071	7 Amount of Contribution (\$) \$108.00
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) none
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Daniel G <hr/> Contributor address; City; State; Zip Code New Hope, PA 18938	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, John <hr/> Contributor address; City; State; Zip Code La Mesa, CA 91941	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Lynda <hr/> Contributor address; City; State; Zip Code Saratoga, CA 95070	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Lynda <hr/> Contributor address; City; State; Zip Code Saratoga, CA 95070	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/205 Rpt: 49/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frankel, Andrea 6 Contributor address; City; State; Zip Code Nevada City, CA 95959	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frankel, Andrea Contributor address; City; State; Zip Code Nevada City, CA 95959	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frankel, Andrea Contributor address; City; State; Zip Code Nevada City, CA 95959	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frankel, Andrea Contributor address; City; State; Zip Code Nevada City, CA 95959	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frankel, Andrea Contributor address; City; State; Zip Code Nevada City, CA 95959	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/205 Rpt: 50/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeark, Kristine <hr/> 6 Contributor address; City; State; Zip Code Ann Arbor, MI 48105	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) psychologist		9 Employer (See Instructions) self
Date 04/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeark, Kristine <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48105	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) psychologist		Employer (See Instructions) self
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeark, Kristine <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48105	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) psychologist		Employer (See Instructions) self
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeark, Kristine <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48105	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) psychologist		Employer (See Instructions) self
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeark, Kristine <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48105	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) psychologist		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/205 Rpt: 51/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freise, Carol <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98199	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freise, Carol <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98199	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freise, Carol <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98199	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Patricia <hr/> Contributor address; City; State; Zip Code Atascadero, CA 93422	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Self
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Patricia <hr/> Contributor address; City; State; Zip Code Atascadero, CA 93422	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/205 Rpt: 52/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedman, Dawn <hr/> 6 Contributor address; City; State; Zip Code Howard Beach, NY 11414	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Technical Writer		9 Employer (See Instructions) D. E. Shaw Research
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedman, Dawn <hr/> Contributor address; City; State; Zip Code Howard Beach, NY 11414	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Technical Writer		Employer (See Instructions) D. E. Shaw Research
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedman, Dawn <hr/> Contributor address; City; State; Zip Code Howard Beach, NY 11414	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Technical Writer		Employer (See Instructions) D. E. Shaw Research
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedman, Hugh <hr/> Contributor address; City; State; Zip Code El Prado, NM 87529	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Land development		Employer (See Instructions) self
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedman, Hugh <hr/> Contributor address; City; State; Zip Code El Prado, NM 87529	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Land development		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/205 Rpt: 53/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedman, Nancy <hr/> 6 Contributor address; City; State; Zip Code Wilmette, IL 60091	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) mental health		9 Employer (See Instructions) self
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedman, Nancy <hr/> Contributor address; City; State; Zip Code Wilmette, IL 60091	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) mental health		Employer (See Instructions) self
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fukushima, Eiichi <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87119	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) ABQMR
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fukushima, Eiichi <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87119	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) ABQMR
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, GORDON <hr/> Contributor address; City; State; Zip Code TEXAS CITY, TX 77591	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/205 Rpt: 54/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, GORDON <hr/> 6 Contributor address; City; State; Zip Code TEXAS CITY, TX 77591	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, GORDON <hr/> Contributor address; City; State; Zip Code TEXAS CITY, TX 77591	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, GORDON <hr/> Contributor address; City; State; Zip Code TEXAS CITY, TX 77591	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, GORDON <hr/> Contributor address; City; State; Zip Code TEXAS CITY, TX 77591	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galinsky, David <hr/> Contributor address; City; State; Zip Code Lower Merion, PA 19066	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/205 Rpt: 55/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galinsky, David <hr/> 6 Contributor address; City; State; Zip Code Lower Merion, PA 19066	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galvin, Jennifer <hr/> Contributor address; City; State; Zip Code Washington, DC 20037	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galvin, Jennifer <hr/> Contributor address; City; State; Zip Code Washington, DC 20037	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garland, David <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55407	Amount of Contribution (\$) \$10.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Peter <hr/> Contributor address; City; State; Zip Code Winslow, ME 04901	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/205 Rpt: 56/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Peter <hr/> 6 Contributor address; City; State; Zip Code Winslow, ME 04901	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Peter <hr/> Contributor address; City; State; Zip Code Winslow, ME 04901	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Peter <hr/> Contributor address; City; State; Zip Code Winslow, ME 04901	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Peter <hr/> Contributor address; City; State; Zip Code Winslow, ME 04901	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Peter <hr/> Contributor address; City; State; Zip Code Winslow, ME 04901	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/205 Rpt: 57/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garvey, Kyle <hr/> 6 Contributor address; City; State; Zip Code Columbus, OH 43201	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gatwood, Rachel <hr/> Contributor address; City; State; Zip Code Reston, VA 20191	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Technical Writer		Employer (See Instructions) Cambium Assessment Inc.
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gatwood, Rachel <hr/> Contributor address; City; State; Zip Code Reston, VA 20191	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Technical Writer		Employer (See Instructions) Cambium Assessment Inc.
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gatwood, Rachel <hr/> Contributor address; City; State; Zip Code Reston, VA 20191	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Technical Writer		Employer (See Instructions) Cambium Assessment Inc.
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gatwood, Rachel <hr/> Contributor address; City; State; Zip Code Reston, VA 20191	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Technical Writer		Employer (See Instructions) Cambium Assessment Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/205 Rpt: 58/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaudet, Caroline <hr/> 6 Contributor address; City; State; Zip Code Malden, MA 02148	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Medical Device Engineer		9 Employer (See Instructions) Boston Scientific Corporation
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaudet, Caroline <hr/> Contributor address; City; State; Zip Code Malden, MA 02148	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Medical Device Engineer		Employer (See Instructions) Boston Scientific Corporation
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Albert R <hr/> Contributor address; City; State; Zip Code Trumansburg, NY 14886	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Albert R <hr/> Contributor address; City; State; Zip Code Trumansburg, NY 14886	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Georgevich, Meg <hr/> Contributor address; City; State; Zip Code Deerfield, IL 60015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/205 Rpt: 59/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Georgevich, Meg 6 Contributor address; City; State; Zip Code Deerfield, IL 60015	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 05/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Georgevich, Meg Contributor address; City; State; Zip Code Deerfield, IL 60015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Georgevich, Meg Contributor address; City; State; Zip Code Deerfield, IL 60015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Georgevich, Meg Contributor address; City; State; Zip Code Deerfield, IL 60015	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Georgevich, Meg Contributor address; City; State; Zip Code Deerfield, IL 60015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/205 Rpt: 60/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Germano, Joseph <hr/> 6 Contributor address; City; State; Zip Code BELLEVUE, WA 98006	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Germano, Joseph <hr/> Contributor address; City; State; Zip Code BELLEVUE, WA 98006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gershon, Vicki <hr/> Contributor address; City; State; Zip Code Gladwyne, PA 19035	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) Self
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gershon, Vicki <hr/> Contributor address; City; State; Zip Code Gladwyne, PA 19035	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) Self
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gildin, Marsha <hr/> Contributor address; City; State; Zip Code New York, NY 10040	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Teaching artist		Employer (See Instructions) Teachers & Writers Collaborative

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/205 Rpt: 61/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gildin, Marsha <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10040	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Teaching artist		9 Employer (See Instructions) Teachers & Writers Collaborative
Date 05/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillaspay, Betsy <hr/> Contributor address; City; State; Zip Code Redmond, WA 98052-3852	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Gillaspay Rhode Faddis & Benn
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillaspay, Betsy <hr/> Contributor address; City; State; Zip Code Redmond, WA 98052-3852	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Gillaspay Rhode Faddis & Benn
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillespie, Patti <hr/> Contributor address; City; State; Zip Code New Bern, NC 28562	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Girard, Jeffrey <hr/> Contributor address; City; State; Zip Code Elgin, IL 60124	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/205 Rpt: 62/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Girard, Jeffrey <hr/> 6 Contributor address; City; State; Zip Code Elgin, IL 60124	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glazer, Mary <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90042	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) not employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goby, Steven <hr/> Contributor address; City; State; Zip Code Glendale, CA 91202	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goertner, Jo Ann <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20916	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Web Application Developer		Employer (See Instructions) CTIA The Wireless Association
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goertner, Jo Ann <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20916	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Web Application Developer		Employer (See Instructions) CTIA The Wireless Association

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/205 Rpt: 63/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldberg, Nancy <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90066	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldberg, Nancy <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90066	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldberg, Nancy <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90066	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldberg, Nancy <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90066	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gollhardt, Kurt <hr/> Contributor address; City; State; Zip Code Union City, CA 94587	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) CerTek Software Designs Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/205 Rpt: 64/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gollhardt, Kurt <hr/> 6 Contributor address; City; State; Zip Code Union City, CA 94587	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Software Developer		9 Employer (See Instructions) CerTek Software Designs Inc.
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Charlene <hr/> Contributor address; City; State; Zip Code Aldie, VA 20105	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Charlene <hr/> Contributor address; City; State; Zip Code Aldie, VA 20105	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Charlene <hr/> Contributor address; City; State; Zip Code Aldie, VA 20105	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, William <hr/> Contributor address; City; State; Zip Code Crozet, VA 22932	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/205 Rpt: 65/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Granberg, Janice <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98144	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grau, Peggy <hr/> Contributor address; City; State; Zip Code irvine, CA 92617	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grau, Peggy <hr/> Contributor address; City; State; Zip Code irvine, CA 92617	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grebanier, Alice <hr/> Contributor address; City; State; Zip Code Branchburg, NJ 08865	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grebanier, Alice <hr/> Contributor address; City; State; Zip Code Branchburg, NJ 08865	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/205 Rpt: 66/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grebanier, Alice <hr/> 6 Contributor address; City; State; Zip Code Branchburg, NJ 08865	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, David <hr/> Contributor address; City; State; Zip Code City of Orange, NJ 07051	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Gretchen <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Gretchen <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Gretchen <hr/> Contributor address; City; State; Zip Code Gilroy, CA 95020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/205 Rpt: 67/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gribschaw, Diane <hr/> 6 Contributor address; City; State; Zip Code Moffett Field, CA 94035	7 Amount of Contribution (\$) \$25.25
8 Principal occupation / Job title (See Instructions) Program Specialist		9 Employer (See Instructions) USRA
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gross, Gary <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gross, Gary <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gross, Nancy <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gross, Nancy <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/205 Rpt: 68/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grundy, Janice <hr/> 6 Contributor address; City; State; Zip Code Williamston, MI 48895	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Registered Nurse		9 Employer (See Instructions) Sparrow Hospital
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grundy, Janice <hr/> Contributor address; City; State; Zip Code Williamston, MI 48895	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Sparrow Hospital
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gubisch, Roland <hr/> Contributor address; City; State; Zip Code Andover, MA 01810	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gulick, Ann & David <hr/> Contributor address; City; State; Zip Code St. Louis, MO 63146	Amount of Contribution (\$) \$10.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gulick, Ann & David <hr/> Contributor address; City; State; Zip Code St. Louis, MO 63146	Amount of Contribution (\$) \$10.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/205 Rpt: 69/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gulin, Jamie <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20024	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Federal		9 Employer (See Instructions) Federal
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gulin, Jamie <hr/> Contributor address; City; State; Zip Code Washington, DC 20024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Federal		Employer (See Instructions) Federal
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gulin, Jamie <hr/> Contributor address; City; State; Zip Code Washington, DC 20024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Federal		Employer (See Instructions) Federal
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guthrie, Barrett <hr/> Contributor address; City; State; Zip Code Cave Creek, AZ 85331	Amount of Contribution (\$) \$10,000.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guzman, Lauren <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) GameStop Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/205 Rpt: 70/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guzman, Lauren <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76118	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) IT		9 Employer (See Instructions) GameStop Inc.
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagio, Lolita <hr/> Contributor address; City; State; Zip Code Saint George, UT 84790	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halasz, Franklin <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87109	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halasz, Franklin <hr/> Contributor address; City; State; Zip Code ALBUQUERQUE, NM 87109	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halko, Gabrielle <hr/> Contributor address; City; State; Zip Code WEST CHESTER, PA 19380-5977	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) West Chester University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/205 Rpt: 71/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halko, Gabrielle <hr/> 6 Contributor address; City; State; Zip Code WEST CHESTER, PA 19380-5977	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) West Chester University
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halloran, John <hr/> Contributor address; City; State; Zip Code Maspeth, NY 11378	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Christian <hr/> Contributor address; City; State; Zip Code Falmouth, KY 41040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) 84.51 LLC
Date 06/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Christian <hr/> Contributor address; City; State; Zip Code Falmouth, KY 41040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) 84.51 LLC
Date 05/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hampton, Alexandra <hr/> Contributor address; City; State; Zip Code Washington, DC 20001	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/205 Rpt: 72/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hampton, Alexandra <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20001	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Handley, Aysha <hr/> Contributor address; City; State; Zip Code Vallejo, CA 94592	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PR		Employer (See Instructions) Upright Position Communications
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Handley, Aysha <hr/> Contributor address; City; State; Zip Code Vallejo, CA 94592	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PR		Employer (See Instructions) Upright Position Communications
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Handley, Aysha <hr/> Contributor address; City; State; Zip Code Vallejo, CA 94592	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) PR		Employer (See Instructions) Upright Position Communications
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanink, Peter <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90815	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Cal Poly Pomona

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/205 Rpt: 73/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanink, Peter <hr/> 6 Contributor address; City; State; Zip Code Long Beach, CA 90815	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Cal Poly Pomona
Date 05/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Paul <hr/> Contributor address; City; State; Zip Code Austin, TX 78727-6870	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) National Instruments
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Paul <hr/> Contributor address; City; State; Zip Code Austin, TX 78727-6870	Amount of Contribution (\$) \$15.25
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) National Instruments
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanway, Susan <hr/> Contributor address; City; State; Zip Code Babcock Ranch, FL 33982	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanway, Susan <hr/> Contributor address; City; State; Zip Code Babcock Ranch, FL 33982	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/205 Rpt: 74/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harland, Donald <hr/> 6 Contributor address; City; State; Zip Code Candler, NC 28715	7 Amount of Contribution (\$) \$62.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Hospital
Date 05/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harland, Donald <hr/> Contributor address; City; State; Zip Code Candler, NC 28715	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Hospital
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harland, Donald <hr/> Contributor address; City; State; Zip Code Candler, NC 28715	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Hospital
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harland, Donald <hr/> Contributor address; City; State; Zip Code Candler, NC 28715	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Hospital
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harland, Donald <hr/> Contributor address; City; State; Zip Code Candler, NC 28715	Amount of Contribution (\$) \$62.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Hospital

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/205 Rpt: 75/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harland, Donald <hr/> 6 Contributor address; City; State; Zip Code Candler, NC 28715	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Hospital
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harland, Donald <hr/> Contributor address; City; State; Zip Code Candler, NC 28715	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Hospital
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harland, Donald <hr/> Contributor address; City; State; Zip Code Candler, NC 28715	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Hospital
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harland, Donald <hr/> Contributor address; City; State; Zip Code Candler, NC 28715	Amount of Contribution (\$) \$62.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Hospital
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Carroll <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27603	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/205 Rpt: 76/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Carroll <hr/> 6 Contributor address; City; State; Zip Code Raleigh, NC 27603	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Carroll <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27603	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Claudia <hr/> Contributor address; City; State; Zip Code Roslindale, MA 02131	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Self
Date 06/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Claudia <hr/> Contributor address; City; State; Zip Code Roslindale, MA 02131	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Self
Date 05/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Guy <hr/> Contributor address; City; State; Zip Code Los Altos, CA 94022-1649	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/205 Rpt: 77/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Guy <hr/> 6 Contributor address; City; State; Zip Code Los Altos, CA 94022-1649	7 Amount of Contribution (\$) \$62.50
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) none
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Rick <hr/> Contributor address; City; State; Zip Code Leeds, MA 01053	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartley, Martha <hr/> Contributor address; City; State; Zip Code FREDERICK, MD 21702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartley, Martha <hr/> Contributor address; City; State; Zip Code FREDERICK, MD 21702	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harvey, Kimberly <hr/> Contributor address; City; State; Zip Code Olathe, KS 66062-2017	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Account support specialist		Employer (See Instructions) Advantage Solutions

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/205 Rpt: 78/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hazlett, Theodore <hr/> 6 Contributor address; City; State; Zip Code Trabuco Canyon, CA 92679	7 Amount of Contribution (\$) \$100.25
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebb, Judy <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87109	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebblewhite, Mary <hr/> Contributor address; City; State; Zip Code Sandy Springs, GA 30328	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Dr. Mary Hrbblewhite
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebblewhite, Mary <hr/> Contributor address; City; State; Zip Code Sandy Springs, GA 30328	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Dr. Mary Hrbblewhite
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebblewhite, Mary <hr/> Contributor address; City; State; Zip Code Sandy Springs, GA 30328	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Dr. Mary Hrbblewhite

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/205 Rpt: 79/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RN LMSW		9 Employer (See Instructions) Faith Presbyterian Hospice
Date 05/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN LMSW		Employer (See Instructions) Faith Presbyterian Hospice
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henson, Lois <hr/> Contributor address; City; State; Zip Code Dayton, OH 45414	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/205 Rpt: 80/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henson, Lois <hr/> 6 Contributor address; City; State; Zip Code Dayton, OH 45414	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hertzmark, Ellen <hr/> Contributor address; City; State; Zip Code New York, NY 10033	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) statistician		Employer (See Instructions) harvard university
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hertzmark, Ellen <hr/> Contributor address; City; State; Zip Code New York, NY 10033	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) statistician		Employer (See Instructions) harvard university
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Rodney <hr/> Contributor address; City; State; Zip Code Grass Valley, CA 95949	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Rodney <hr/> Contributor address; City; State; Zip Code Grass Valley, CA 95949	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/205 Rpt: 81/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Rodney <hr/> 6 Contributor address; City; State; Zip Code Grass Valley, CA 95949	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) None
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilty, Mark <hr/> Contributor address; City; State; Zip Code Barrington, RI 02806	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Not Employed
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilty, Mark <hr/> Contributor address; City; State; Zip Code Barrington, RI 02806	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Not Employed
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobbs, Ann <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20901	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Madelyn <hr/> Contributor address; City; State; Zip Code Tomales, CA 94971	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/205 Rpt: 82/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Madelyn <hr/> 6 Contributor address; City; State; Zip Code Tomales, CA 94971	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Joseph <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90041	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollier, Dawn <hr/> Contributor address; City; State; Zip Code Venice, CA 90291	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollier, Dawn <hr/> Contributor address; City; State; Zip Code Venice, CA 90291	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holsenbeck, Stephen <hr/> Contributor address; City; State; Zip Code Waltham, MA 02453	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/205 Rpt: 83/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holsenbeck, Stephen <hr/> 6 Contributor address; City; State; Zip Code Waltham, MA 02453	7 Amount of Contribution (\$) \$9.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holtshouser, Sherrell <hr/> Contributor address; City; State; Zip Code West Hartford, CT 06110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holtshouser, Sherrell <hr/> Contributor address; City; State; Zip Code West Hartford, CT 06110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holtshouser, Sherrell <hr/> Contributor address; City; State; Zip Code West Hartford, CT 06110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooper, Helen <hr/> Contributor address; City; State; Zip Code Rumsey, CA 95679	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/205 Rpt: 84/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooper, Helen <hr/> 6 Contributor address; City; State; Zip Code Rumsey, CA 95679	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Farmer		9 Employer (See Instructions) Self
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horwitz, Chris <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15217	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ceo		Employer (See Instructions) electrogrip
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horwitz, Chris <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15217	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) ceo		Employer (See Instructions) electrogrip
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houck, Marcia <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Susan <hr/> Contributor address; City; State; Zip Code Incline Village, NV 89450	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/205 Rpt: 85/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Susan <hr/> 6 Contributor address; City; State; Zip Code Incline Village, NV 89450	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hursh, Lydia H <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85718	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hursh, Lydia H <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85718	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IORII, REGINA <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19808	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IORII, REGINA <hr/> Contributor address; City; State; Zip Code Wilmington, DE 19808	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/205 Rpt: 86/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IORII, REGINA <hr/> 6 Contributor address; City; State; Zip Code Wilmington, DE 19808	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Imperatore, Catherine <hr/> Contributor address; City; State; Zip Code Reston, VA 20191	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) ACTE
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Imperatore, Catherine <hr/> Contributor address; City; State; Zip Code Reston, VA 20191	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) ACTE
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Imperatore, Catherine <hr/> Contributor address; City; State; Zip Code Reston, VA 20191	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) ACTE
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inkster, Robert <hr/> Contributor address; City; State; Zip Code St Cloud, MN 56303	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/205 Rpt: 87/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivey, Dana <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10024	7 Amount of Contribution (\$) \$20.25
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobs, Kathryn <hr/> Contributor address; City; State; Zip Code Chelan, WA 98816	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobs, Kathryn <hr/> Contributor address; City; State; Zip Code Chelan, WA 98816	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobs, Kathryn <hr/> Contributor address; City; State; Zip Code Chelan, WA 98816	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobs, Kathryn <hr/> Contributor address; City; State; Zip Code Chelan, WA 98816	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/205 Rpt: 88/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamieson, Robert <hr/> 6 Contributor address; City; State; Zip Code Edmonds, WA 98020	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) IT Consultant		9 Employer (See Instructions) University of Washington
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamieson, Robert <hr/> Contributor address; City; State; Zip Code Edmonds, WA 98020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) IT Consultant		Employer (See Instructions) University of Washington
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamieson, Robert <hr/> Contributor address; City; State; Zip Code Edmonds, WA 98020	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe, Edward <hr/> Contributor address; City; State; Zip Code Bakersfield, CA 93306-2406	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe, Edward <hr/> Contributor address; City; State; Zip Code Bakersfield, CA 93306-2406	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/205 Rpt: 89/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johns, Pam <hr/> 6 Contributor address; City; State; Zip Code Athens, GA 30606	7 Amount of Contribution (\$) \$20.25
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Gilda <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19131	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NP		Employer (See Instructions) Ardmore peds
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Gilda <hr/> Contributor address; City; State; Zip Code Phila, PA 19131	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) Woodbury Pediatrics
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Gilda <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19131	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NP		Employer (See Instructions) Ardmore Peds
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Gilda <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19131	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NP		Employer (See Instructions) Ardmore peds

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/205 Rpt: 90/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Gilda <hr/> 6 Contributor address; City; State; Zip Code Phila, PA 19131	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Nurse Practitioner		9 Employer (See Instructions) Woodbury Pediatrics
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Gilda <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19131	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NP		Employer (See Instructions) Ardmore Peds
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Gilda <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19131	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NP		Employer (See Instructions) Ardmore peds
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Mina <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) Old Stone House
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Mina <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) Old Stone House

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/205 Rpt: 91/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Scott 6 Contributor address; City; State; Zip Code Angel Fire, NM 87710	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Writer		9 Employer (See Instructions) self
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Scott Contributor address; City; State; Zip Code Angel Fire, NM 87710	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) self
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Wendy Contributor address; City; State; Zip Code San Francisco, CA 94131	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Design Manager		Employer (See Instructions) Almac Clinical Technologies
Date 06/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Wendy Contributor address; City; State; Zip Code San Francisco, CA 94131	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Design Manager		Employer (See Instructions) Almac Clinical Technologies
Date 05/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KADEN, LAUREN Contributor address; City; State; Zip Code Riverwoods, IL 60015	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/205 Rpt: 92/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KADEN, LAUREN <hr/> 6 Contributor address; City; State; Zip Code Riverwoods, IL 60015	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNOX, MELBURN <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) sales		Employer (See Instructions) satan
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNOX, MELBURN <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) sales		Employer (See Instructions) satan
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalb, Matthew <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27516	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Telecom Engineer		Employer (See Instructions) Verizon
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalb, Matthew <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27516	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Telecom Engineer		Employer (See Instructions) Verizon

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/205 Rpt: 93/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalb, Matthew <hr/> 6 Contributor address; City; State; Zip Code Chapel Hill, NC 27516	7 Amount of Contribution (\$) \$100.25
8 Principal occupation / Job title (See Instructions) Telecom Engineer		9 Employer (See Instructions) HCLTech
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katzenstein, Robin <hr/> Contributor address; City; State; Zip Code Davie, FL 33328	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katzenstein, Robin <hr/> Contributor address; City; State; Zip Code Davie, FL 33328	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufman, Allan <hr/> Contributor address; City; State; Zip Code Teaneck, NJ 07666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Actuary		Employer (See Instructions) FTI Consulting
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufman, Allan <hr/> Contributor address; City; State; Zip Code Teaneck, NJ 07666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Actuary		Employer (See Instructions) FTI Consulting

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/205 Rpt: 94/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufman, Linda <hr/> 6 Contributor address; City; State; Zip Code Lexington, MA 02421	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufman, Linda <hr/> Contributor address; City; State; Zip Code Lexington, MA 02421	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keiger, Darr <hr/> Contributor address; City; State; Zip Code Miami, FL 33131	Amount of Contribution (\$) \$25.25
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) American Airlines
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keipert, Lisa <hr/> Contributor address; City; State; Zip Code Wilmette, IL 60091	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Litigation Assistant		Employer (See Instructions) Law Offices of R.F. Wittmeyer
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keipert, Lisa <hr/> Contributor address; City; State; Zip Code Wilmette, IL 60091	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Litigation Assistant		Employer (See Instructions) Law Offices of R.F. Wittmeyer

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/205 Rpt: 95/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Constance <hr/> 6 Contributor address; City; State; Zip Code Riverside, CA 92509	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Constance <hr/> Contributor address; City; State; Zip Code Riverside, CA 92509	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Constance <hr/> Contributor address; City; State; Zip Code Riverside, CA 92509	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Killam, Adrian <hr/> Contributor address; City; State; Zip Code West Lake Hills, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) Self
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Killam, Adrian <hr/> Contributor address; City; State; Zip Code West Lake Hills, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/205 Rpt: 96/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, William <hr/> 6 Contributor address; City; State; Zip Code Needham, MA 02492	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, William <hr/> Contributor address; City; State; Zip Code Needham, MA 02492	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Stacy <hr/> Contributor address; City; State; Zip Code Ashfield, MA 01330-9639	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) theatre director		Employer (See Instructions) double edge theatre
Date 04/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klemann, Marie <hr/> Contributor address; City; State; Zip Code Naples, FL 34108	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klemann, Marie <hr/> Contributor address; City; State; Zip Code Naples, FL 34108	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/205 Rpt: 97/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klemann, Marie <hr/> 6 Contributor address; City; State; Zip Code Naples, FL 34108	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kogan, Robert <hr/> Contributor address; City; State; Zip Code BROOKLYN, NY 11218-1528	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kogel, Irina <hr/> Contributor address; City; State; Zip Code Boston, MA 02114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Lecturer		Employer (See Instructions) Boston University
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kogel, Irina <hr/> Contributor address; City; State; Zip Code Boston, MA 02114	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Lecturer		Employer (See Instructions) Boston University
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovich, Sarah <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/205 Rpt: 98/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kraft, Evan <hr/> 6 Contributor address; City; State; Zip Code Wayne, NJ 07470	7 Amount of Contribution (\$) \$124.00
8 Principal occupation / Job title (See Instructions) College Professor		9 Employer (See Instructions) American University
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kraft, Evan <hr/> Contributor address; City; State; Zip Code Wayne, NJ 07470	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) College Professor		Employer (See Instructions) American University
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kraft, Evan <hr/> Contributor address; City; State; Zip Code Wayne, NJ 07470	Amount of Contribution (\$) \$124.00
Principal occupation / Job title (See Instructions) College Professor		Employer (See Instructions) American University
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krasnowski, Kathy <hr/> Contributor address; City; State; Zip Code St Charles, IL 60175	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krause, Libby <hr/> Contributor address; City; State; Zip Code Rockport, TX 78382	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/205 Rpt: 99/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krause, Libby <hr/> 6 Contributor address; City; State; Zip Code Rockport, TX 78382	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kroplick, Rosalind <hr/> Contributor address; City; State; Zip Code Roslyn, NY 11576	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Villanova, PA 19085	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuhn, Gordon <hr/> Contributor address; City; State; Zip Code Villanova, PA 19085	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kutzko, Deborah <hr/> Contributor address; City; State; Zip Code Burlington, VT 05401	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/205 Rpt: 100/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kutzko, Deborah <hr/> 6 Contributor address; City; State; Zip Code Burlington, VT 05401	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamb, Barbara <hr/> Contributor address; City; State; Zip Code Langley, WA 98260	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamb, Barbara <hr/> Contributor address; City; State; Zip Code Langley, WA 98260	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langari, Reza <hr/> Contributor address; City; State; Zip Code College Station, TX 77841-2977	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) TAMU
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langari, Reza <hr/> Contributor address; City; State; Zip Code College Station, TX 77841-2977	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) TAMU

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/205 Rpt: 101/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langari, Reza <hr/> 6 Contributor address; City; State; Zip Code College Station, TX 77841-2977	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) TAMU
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langman, Claudia <hr/> Contributor address; City; State; Zip Code Chicago, IL 60647	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langman, Claudia <hr/> Contributor address; City; State; Zip Code Chicago, IL 60647	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langman, Claudia <hr/> Contributor address; City; State; Zip Code Chicago, IL 60647	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Judith <hr/> Contributor address; City; State; Zip Code New Canaan, CT 06840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) designer		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/205 Rpt: 102/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Judith <hr/> 6 Contributor address; City; State; Zip Code New Canaan, CT 06840	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) designer		9 Employer (See Instructions) self
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawless, Elizabeth <hr/> Contributor address; City; State; Zip Code Columbus, OH 43212	Amount of Contribution (\$) \$40.50
Principal occupation / Job title (See Instructions) Pet sitter		Employer (See Instructions) Se
Date 05/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lazerus, Judi <hr/> Contributor address; City; State; Zip Code Garland, TX 75040	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Venture Solutions
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lazerus, Judi <hr/> Contributor address; City; State; Zip Code Garland, TX 75040	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Venture Solutions
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leake, David <hr/> Contributor address; City; State; Zip Code Kaneohe, HI 96744	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UH Center on Disability Studies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/205 Rpt: 103/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leake, David <hr/> 6 Contributor address; City; State; Zip Code Kaneohe, HI 96744	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) UH Center on Disability Studies
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leake, David <hr/> Contributor address; City; State; Zip Code Kaneohe, HI 96744	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UH Center on Disability Studies
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lefevre, Ruth <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) n/a
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lesser, Margo <hr/> Contributor address; City; State; Zip Code Bloomfield Hills, MI 48304	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, David <hr/> Contributor address; City; State; Zip Code Annandale, VA 22003	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/205 Rpt: 104/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, David <hr/> 6 Contributor address; City; State; Zip Code Annandale, VA 22003	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, David <hr/> Contributor address; City; State; Zip Code Annandale, VA 22003	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Madelon <hr/> Contributor address; City; State; Zip Code Portland, OR 97202	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) none
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Madelon <hr/> Contributor address; City; State; Zip Code Portland, OR 97202	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) none
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lexton, Lauren <hr/> Contributor address; City; State; Zip Code Encino, CA 91436	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/205 Rpt: 105/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lexton, Lauren <hr/> 6 Contributor address; City; State; Zip Code Encino, CA 91436	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lexton, Lauren <hr/> Contributor address; City; State; Zip Code Encino, CA 91436	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieberman, Robert <hr/> Contributor address; City; State; Zip Code South Euclid, OH 44121	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieberman, Robert <hr/> Contributor address; City; State; Zip Code South Euclid, OH 44121	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindner, Judith <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) data entry clerk		Employer (See Instructions) Freestore Foodbank

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/205 Rpt: 106/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindner, Judith <hr/> 6 Contributor address; City; State; Zip Code Cincinnati, OH 45227	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) data entry clerk		9 Employer (See Instructions) Freestore Foodbank
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindner, Judith <hr/> Contributor address; City; State; Zip Code Cincinnati, OH 45227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) data entry clerk		Employer (See Instructions) Freestore Foodbank
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisowski, Robert <hr/> Contributor address; City; State; Zip Code Edison, NJ 08820	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisowski, Robert <hr/> Contributor address; City; State; Zip Code Edison, NJ 08820	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisowski, Robert <hr/> Contributor address; City; State; Zip Code Edison, NJ 08820	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/205 Rpt: 107/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litow, Jeff <hr/> 6 Contributor address; City; State; Zip Code Malibu, CA 90265	7 Amount of Contribution (\$) \$5,000.25
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, William <hr/> Contributor address; City; State; Zip Code Chicago, IL 60660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, William <hr/> Contributor address; City; State; Zip Code Chicago, IL 60660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Littlewood, Ann <hr/> Contributor address; City; State; Zip Code Portland, OR 97212	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loren, Wen <hr/> Contributor address; City; State; Zip Code Eugene, OR 97405	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Instructor		Employer (See Instructions) Lane Community College

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/205 Rpt: 108/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowery, Virginia 6 Contributor address; City; State; Zip Code New Orleans, LA 70119	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowery, Virginia Contributor address; City; State; Zip Code New Orleans, LA 70119	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowery, Virginia Contributor address; City; State; Zip Code New Orleans, LA 70119	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowery, Virginia Contributor address; City; State; Zip Code New Orleans, LA 70119	Amount of Contribution (\$) \$59.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowery, Virginia Contributor address; City; State; Zip Code New Orleans, LA 70119	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 106/205 Rpt: 109/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowery, Virginia <hr/> 6 Contributor address; City; State; Zip Code New Orleans, LA 70119	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowry, Sally <hr/> Contributor address; City; State; Zip Code Henderson, NV 89011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowry, Sally <hr/> Contributor address; City; State; Zip Code Henderson, NV 89011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luksenburg, Lillian <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20902	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Univ. of Maryland
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luksenburg, Lillian <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20902	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Univ. of Maryland

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/205 Rpt: 110/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luksenburg, Lillian <hr/> 6 Contributor address; City; State; Zip Code Silver Spring, MD 20902	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Univ. of Maryland
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyman, Alice <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97330	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyman, Alice <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97330	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyman, Alice <hr/> Contributor address; City; State; Zip Code Corvallis, OR 97330	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lytle, Steven <hr/> Contributor address; City; State; Zip Code Urbandale, IA 50322	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/205 Rpt: 111/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lytle, Steven <hr/> 6 Contributor address; City; State; Zip Code Urbandale, IA 50322	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lytle, Steven <hr/> Contributor address; City; State; Zip Code Urbandale, IA 50322	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M I KKELSEN, FLORIS <hr/> Contributor address; City; State; Zip Code Seattle, WA 98103	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRAW, LILLETTE <hr/> Contributor address; City; State; Zip Code San Clemente, CA 92673	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRAW, LILLETTE <hr/> Contributor address; City; State; Zip Code San Clemente, CA 92673	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/205 Rpt: 112/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, GEORGIA <hr/> 6 Contributor address; City; State; Zip Code BRATTLEBORO, VT 05301	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORGAN, GEORGIA <hr/> Contributor address; City; State; Zip Code BRATTLEBORO, VT 05301	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Patricia <hr/> Contributor address; City; State; Zip Code New York, NY 10033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Patricia <hr/> Contributor address; City; State; Zip Code New York, NY 10033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Patricia <hr/> Contributor address; City; State; Zip Code New York, NY 10033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/205 Rpt: 113/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Patricia 6 Contributor address; City; State; Zip Code NY, NY 10033	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Patricia Contributor address; City; State; Zip Code New York, NY 10033	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Patricia Contributor address; City; State; Zip Code New York, NJ 10033	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Patricia Contributor address; City; State; Zip Code New York, NY 10033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Patricia Contributor address; City; State; Zip Code NY, NY 10033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/205 Rpt: 114/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Patricia 6 Contributor address; City; State; Zip Code New York, NY 10033	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Patricia Contributor address; City; State; Zip Code New York, NJ 10033	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Patricia Contributor address; City; State; Zip Code New York, NY 10033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malik, Laurie Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$1,000.25
Principal occupation / Job title (See Instructions) organization/database consultant		Employer (See Instructions) self
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallory, Douglas Contributor address; City; State; Zip Code Levittown, NY 11756	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/205 Rpt: 115/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallory, Douglas <hr/> 6 Contributor address; City; State; Zip Code Levittown, NY 11756	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) none
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallory, Douglas <hr/> Contributor address; City; State; Zip Code Levittown, NY 11756	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malone, Jeffrey <hr/> Contributor address; City; State; Zip Code Ben Lomond, CA 95005-9217	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) spiritual teacher		Employer (See Instructions) self
Date 05/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malone, Jeffrey <hr/> Contributor address; City; State; Zip Code Ben Lomond, CA 95005-9217	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) spiritual teacher		Employer (See Instructions) self
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malone, Jeffrey <hr/> Contributor address; City; State; Zip Code Ben Lomond, CA 95005-9217	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) spiritual teacher		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/205 Rpt: 116/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malven, Tania J. <hr/> 6 Contributor address; City; State; Zip Code Tucson, AZ 85719	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malven, Tania J. <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85719	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlowe, Thomas <hr/> Contributor address; City; State; Zip Code Rahway, NJ 07065	Amount of Contribution (\$) \$50.25
Principal occupation / Job title (See Instructions) Professor Emeritus		Employer (See Instructions) Seton Hall University
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marquardt, Karen <hr/> Contributor address; City; State; Zip Code Circle Pines, MN 55014	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Hennepin County
Date 04/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Randi <hr/> Contributor address; City; State; Zip Code Houston, TX 77021	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Rice University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/205 Rpt: 117/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Randi <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77021	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Rice University
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Randi <hr/> Contributor address; City; State; Zip Code Houston, TX 77021	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Rice University
Date 04/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Robin <hr/> Contributor address; City; State; Zip Code Littleton, CO 80127	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maruca, Sam <hr/> Contributor address; City; State; Zip Code Washington, DC 20008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Covington & Burling LLP
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maruca, Sam <hr/> Contributor address; City; State; Zip Code Washington, DC 20008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Covington & Burling LLP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/205 Rpt: 118/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maschal, Alberta <hr/> 6 Contributor address; City; State; Zip Code Colonial Beach, VA 22443	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Executive Assistant		9 Employer (See Instructions) Majestic Builders Corp.
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maschal, Alberta <hr/> Contributor address; City; State; Zip Code Colonial Beach, VA 22443	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) Majestic Builders Corp.
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Sally D. <hr/> Contributor address; City; State; Zip Code Williamsburg, VA 23188	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Sally D. <hr/> Contributor address; City; State; Zip Code Williamsburg, VA 23188	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathews, Margaret <hr/> Contributor address; City; State; Zip Code Manhattan, NY 10032	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/205 Rpt: 119/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathews, Margaret M 6 Contributor address; City; State; Zip Code New York, NY 10024	7 Amount of Contribution (\$) \$20.25
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthias, Jonelle Contributor address; City; State; Zip Code Decatur, GA 30030	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) May, Leah Contributor address; City; State; Zip Code Dallas, TX 75248-4050	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) May, Leah Contributor address; City; State; Zip Code Dallas, TX 75248-4050	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) May, Norman Contributor address; City; State; Zip Code Pittsburgh, PA 15212	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/205 Rpt: 120/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) May, Norman 6 Contributor address; City; State; Zip Code Pittsburgh, PA 15212	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnelly, Elaine Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnelly, Elaine Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAnelly, Elaine Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCloskey, Helen Contributor address; City; State; Zip Code Rumsey, CA 95679	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/205 Rpt: 121/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCloskey, Helen 6 Contributor address; City; State; Zip Code Rumsey, CA 95679	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Susan Contributor address; City; State; Zip Code Washington, DC 20008	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Susan Contributor address; City; State; Zip Code Washington, DC 20008	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Susan Contributor address; City; State; Zip Code Washington, DC 20008	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Susan Contributor address; City; State; Zip Code Washington, DC 20008	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/205 Rpt: 122/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Susan <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20008	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonough, Mary <hr/> Contributor address; City; State; Zip Code Dorchester, MA 02125	Amount of Contribution (\$) \$150.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 04/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 04/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/205 Rpt: 123/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/205 Rpt: 124/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self
Date 05/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 05/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/205 Rpt: 125/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self
Date 06/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/205 Rpt: 126/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLure, Nancy <hr/> Contributor address; City; State; Zip Code Westborough, MA 01581	Amount of Contribution (\$) \$10.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLure, Nancy <hr/> Contributor address; City; State; Zip Code Westborough, MA 01581	Amount of Contribution (\$) \$10.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Lance <hr/> Contributor address; City; State; Zip Code Orangevale, CA 95662	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) State of California

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 124/205 Rpt: 127/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Lance 6 Contributor address; City; State; Zip Code Orangevale, CA 95662	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) State of California
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McPhail, Heather A Contributor address; City; State; Zip Code Arlington, VA 22204	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Dance Instructor		Employer (See Instructions) Self
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McPhail, Heather A Contributor address; City; State; Zip Code Arlington, VA 22204	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Dance Instructor		Employer (See Instructions) Self
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menefee, Bruce Contributor address; City; State; Zip Code BURBANK, CA 91505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menefee, Bruce Contributor address; City; State; Zip Code BURBANK, CA 91505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/205 Rpt: 128/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meredith, Vicki 6 Contributor address; City; State; Zip Code Bothell, WA 98012	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meredith, Vicki Contributor address; City; State; Zip Code Bothell, WA 98012	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 126/205 Rpt: 129/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cara <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90048	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cara <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90048	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Carla <hr/> Contributor address; City; State; Zip Code Delaware, OH 43015	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Carla <hr/> Contributor address; City; State; Zip Code Delaware, OH 43015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Elizabeth <hr/> Contributor address; City; State; Zip Code New York, NY 10028-1433	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Retail VP		Employer (See Instructions) Macy's

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 127/205 Rpt: 130/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milne, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milne, Cynthia <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mindes, Paula <hr/> Contributor address; City; State; Zip Code Cleveland Hts, OH 44118	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mindes, Paula <hr/> Contributor address; City; State; Zip Code Cleveland Hts, OH 44118	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mindes, Paula <hr/> Contributor address; City; State; Zip Code Cleveland Hts, OH 44118	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/205 Rpt: 131/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minsuk, Sharon <hr/> 6 Contributor address; City; State; Zip Code Belmont, CA 94002	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minsuk, Sharon <hr/> Contributor address; City; State; Zip Code Belmont, CA 94002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minsuk, Sharon <hr/> Contributor address; City; State; Zip Code Belmont, CA 94002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montalvo, Jessica <hr/> Contributor address; City; State; Zip Code Chicago, IL 60640	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montalvo, Jessica <hr/> Contributor address; City; State; Zip Code Chicago, IL 60640	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 129/205 Rpt: 132/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Claire <hr/> 6 Contributor address; City; State; Zip Code Corvallis, OR 97330	7 Amount of Contribution (\$) \$100.25
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Dorothy <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Dorothy <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Jan <hr/> Contributor address; City; State; Zip Code Claremont, CA 91711	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Jan <hr/> Contributor address; City; State; Zip Code Claremont, CA 91711	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/205 Rpt: 133/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Judith <hr/> 6 Contributor address; City; State; Zip Code Henderson, NV 89011	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Judith <hr/> Contributor address; City; State; Zip Code Henderson, NV 89011	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Judith <hr/> Contributor address; City; State; Zip Code Henderson, NV 89011	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Mary <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Mary <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/205 Rpt: 134/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Mary <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11215	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrow, Teresa <hr/> Contributor address; City; State; Zip Code Macon, GA 31220	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Vocational Rehabilitation Counselor		Employer (See Instructions) Anthem/Elevance Health
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrow, Teresa <hr/> Contributor address; City; State; Zip Code Macon, GA 31220	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Vocational Rehabilitation Counselor		Employer (See Instructions) Anthem/Elevance Health
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moulton, Sharon <hr/> Contributor address; City; State; Zip Code LEEDS, MA 01053	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moulton, Sharon <hr/> Contributor address; City; State; Zip Code LEEDS, MA 01053	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 132/205 Rpt: 135/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray Fimbel, Marianne <hr/> 6 Contributor address; City; State; Zip Code Lambertville, NJ 08530	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray Fimbel, Marianne <hr/> Contributor address; City; State; Zip Code Lambertville, NJ 08530	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mushabac, Jane <hr/> Contributor address; City; State; Zip Code New York, NY 10025	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nadeau, Bart <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94131-3238	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nadeau, Bart <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94131-3238	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 133/205 Rpt: 136/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Virginia <hr/> 6 Contributor address; City; State; Zip Code Las Vegas, NV 89135	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Virginia <hr/> Contributor address; City; State; Zip Code Las Vegas, NV 89135	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nerken, Ruth <hr/> Contributor address; City; State; Zip Code New York, NY 10023	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Self
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nerken, Ruth <hr/> Contributor address; City; State; Zip Code New York, NY 10023	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Self
Date 05/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholls, Rosalie <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 134/205 Rpt: 137/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholls, Rosalie 6 Contributor address; City; State; Zip Code Austin, TX 78748	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolan, Lawrence Contributor address; City; State; Zip Code Saint Louis, MO 63105	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolan, Lawrence E Contributor address; City; State; Zip Code Saint Louis, MO 63105	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noto, Nancy Contributor address; City; State; Zip Code Cupertino, CA 95014-2727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noyes, James Contributor address; City; State; Zip Code Hilton Head Island, SC 29928	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 135/205 Rpt: 138/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noyes, James <hr/> 6 Contributor address; City; State; Zip Code Hilton Head Island, SC 29928	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noyes, James <hr/> Contributor address; City; State; Zip Code Hilton Head Island, SC 29928	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nye, Julie <hr/> Contributor address; City; State; Zip Code Rougemont, NC 27572-6500	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nye, Julie <hr/> Contributor address; City; State; Zip Code Rougemont, NC 27572-6500	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OJile, Judith <hr/> Contributor address; City; State; Zip Code Ballwin, MO 63011	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 136/205 Rpt: 139/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OJile, Judith <hr/> 6 Contributor address; City; State; Zip Code Ballwin, MO 63011	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OPray, Lynette <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55406	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OPray, Lynette <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55406	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oelsner, Leslie <hr/> Contributor address; City; State; Zip Code Fayetteville, AR 72701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) social worker		Employer (See Instructions) self
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oelsner, Leslie <hr/> Contributor address; City; State; Zip Code Fayetteville, AR 72701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) social worker		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 137/205 Rpt: 140/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osborn, Michael 6 Contributor address; City; State; Zip Code Memphis, TN 38111	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osborn, Michael Contributor address; City; State; Zip Code Memphis, TN 38111	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osborn, Michael Contributor address; City; State; Zip Code Memphis, TN 38111	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Otoshi, John Contributor address; City; State; Zip Code Berkeley, CA 94705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Otoshi, John Contributor address; City; State; Zip Code Berkeley, CA 94705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 138/205 Rpt: 141/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Brien, Louise <hr/> 6 Contributor address; City; State; Zip Code Newton, MA 02460	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palka, John <hr/> Contributor address; City; State; Zip Code Maple Grove, MN 55369	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palka, John <hr/> Contributor address; City; State; Zip Code Maple Grove, MN 55369	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palley, Amanda <hr/> Contributor address; City; State; Zip Code North Hollywood, CA 91601	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) CBS
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parken, Judy <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 139/205 Rpt: 142/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parken, Judy <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, James <hr/> Contributor address; City; State; Zip Code Bloomington, IL 61701	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, James <hr/> Contributor address; City; State; Zip Code Bloomington, IL 61701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, James <hr/> Contributor address; City; State; Zip Code Bloomington, IL 61701	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, James <hr/> Contributor address; City; State; Zip Code Bloomington, IL 61701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 140/205 Rpt: 143/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastin, Susan <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60626-2656	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastin, Susan <hr/> Contributor address; City; State; Zip Code Chicago, IL 60626-2656	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastin, Susan <hr/> Contributor address; City; State; Zip Code Chicago, IL 60626-2656	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Judith <hr/> Contributor address; City; State; Zip Code Somerdale, NJ 08083	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Judith <hr/> Contributor address; City; State; Zip Code Somerdale, NJ 08083	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 141/205 Rpt: 144/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perlman, Lee <hr/> 6 Contributor address; City; State; Zip Code Carlisle, MA 01741	7 Amount of Contribution (\$) \$20.25
8 Principal occupation / Job title (See Instructions) teacher		9 Employer (See Instructions) MIT
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perlman, Lee <hr/> Contributor address; City; State; Zip Code Carlisle, MA 01741	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) MIT
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perlson, Judith <hr/> Contributor address; City; State; Zip Code Algonquin, IL 60102	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Beverly <hr/> Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Beverly <hr/> Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 142/205 Rpt: 145/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Picinini, Silvio <hr/> 6 Contributor address; City; State; Zip Code Mountain House, CA 95391	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Nlp		9 Employer (See Instructions) eBay
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Picinini, Silvio <hr/> Contributor address; City; State; Zip Code Mountain House, CA 95391	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Nlp		Employer (See Instructions) eBay
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pien, Edward <hr/> Contributor address; City; State; Zip Code Washington, DC 20016	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Medical Doctor		Employer (See Instructions) Medstar Georgetown University Hospital
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pien, Edward <hr/> Contributor address; City; State; Zip Code Washington, DC 20016	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Medical Doctor		Employer (See Instructions) Medstar Georgetown University Hospital
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pond, Tim <hr/> Contributor address; City; State; Zip Code Half Moon Bay, CA 94019-1832	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 143/205 Rpt: 146/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pond, Tim <hr/> 6 Contributor address; City; State; Zip Code Half Moon Bay, CA 94019-1832	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Designer		9 Employer (See Instructions) Self
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pond, Tim <hr/> Contributor address; City; State; Zip Code Half Moon Bay, CA 94019-1832	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Lori <hr/> Contributor address; City; State; Zip Code Carlsbad, CA 92009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Anne <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22911	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Data Technician		Employer (See Instructions) Univ. of Va.
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Larry <hr/> Contributor address; City; State; Zip Code White Plains, NY 10607	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/205 Rpt: 147/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Larry <hr/> 6 Contributor address; City; State; Zip Code White Plains, NY 10607	7 Amount of Contribution (\$) \$20.25
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Larry <hr/> Contributor address; City; State; Zip Code White Plains, NY 10607	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prodromos, Dean <hr/> Contributor address; City; State; Zip Code Folsom, CA 95630	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purdue, Lynette <hr/> Contributor address; City; State; Zip Code knoxville, TN 37920	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purdue, Lynette <hr/> Contributor address; City; State; Zip Code knoxville, TN 37920	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 145/205 Rpt: 148/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pyle, David <hr/> 6 Contributor address; City; State; Zip Code Kensington, CA 94708	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pyle, David <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94708	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pyle, David <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94708	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pyle, David <hr/> Contributor address; City; State; Zip Code Kensington, CA 94708	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rabroker, Timothy <hr/> Contributor address; City; State; Zip Code Killeen, TX 76542	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Killeen

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 146/205 Rpt: 149/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ragucci, Maria <hr/> 6 Contributor address; City; State; Zip Code Rye, NY 10580	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rapp, Rayna <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) college professor		Employer (See Instructions) NYU
Date 05/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rapp, Rayna <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) college professor		Employer (See Instructions) NYU
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rapp, Rayna <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) college professor		Employer (See Instructions) NYU
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rattigan, Peter <hr/> Contributor address; City; State; Zip Code Pitman, NJ 08071	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Asst. Professor		Employer (See Instructions) Rowan University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 147/205 Rpt: 150/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rattigan, Peter <hr/> 6 Contributor address; City; State; Zip Code Pitman, NJ 08071	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Asst. Professor		9 Employer (See Instructions) Rowan University
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rattigan, Peter <hr/> Contributor address; City; State; Zip Code Pitman, NJ 08071	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Asst. Professor		Employer (See Instructions) Rowan University
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rattigan, Peter <hr/> Contributor address; City; State; Zip Code Pitman, NJ 08071	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Asst. Professor		Employer (See Instructions) Rowan University
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, Bonnie <hr/> Contributor address; City; State; Zip Code Woolwich, ME 04579	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, Bonnie <hr/> Contributor address; City; State; Zip Code Woolwich, ME 04579	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 148/205 Rpt: 151/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, Bonnie <hr/> 6 Contributor address; City; State; Zip Code Woolwich, ME 04579	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Designer		9 Employer (See Instructions) Self
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, Bonnie <hr/> Contributor address; City; State; Zip Code Woolwich, ME 04579	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, Bonnie <hr/> Contributor address; City; State; Zip Code Woolwich, ME 04579	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reiser, Amy <hr/> Contributor address; City; State; Zip Code Northampton, MA 01060	Amount of Contribution (\$) \$50.50
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Curt <hr/> Contributor address; City; State; Zip Code Cleveland Heights, OH 44106	Amount of Contribution (\$) \$100.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 149/205 Rpt: 152/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Curt 6 Contributor address; City; State; Zip Code Cleveland Heights, OH 44106	7 Amount of Contribution (\$) \$100.24
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhorer, Alexis Contributor address; City; State; Zip Code Oakland, CA 94618	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Squaretrade Inc.
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhorer, Alexis Contributor address; City; State; Zip Code Oakland, CA 94618	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Squaretrade Inc.
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhorer, Alexis Contributor address; City; State; Zip Code Oakland, CA 94618	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Squaretrade Inc.
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhorer, Alexis Contributor address; City; State; Zip Code Oakland, CA 94618	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Squaretrade Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 150/205 Rpt: 153/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhorer, Alexis <hr/> 6 Contributor address; City; State; Zip Code Oakland, CA 94618	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Squaretrade Inc.
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Mary <hr/> Contributor address; City; State; Zip Code Rochester, MN 55906	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, William <hr/> Contributor address; City; State; Zip Code San Anselmo, CA 94960	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, William <hr/> Contributor address; City; State; Zip Code Mill Valley, CA 94941	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, William <hr/> Contributor address; City; State; Zip Code San Anselmo, CA 94960	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 151/205 Rpt: 154/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, William <hr/> 6 Contributor address; City; State; Zip Code Mill Valley, CA 94941	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rigik, Charleth <hr/> Contributor address; City; State; Zip Code Forest Grove, OR 97116	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rigik, Charleth <hr/> Contributor address; City; State; Zip Code Forest Grove, OR 97116	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roden, Nicholas <hr/> Contributor address; City; State; Zip Code Scotch Plains, NJ 07076	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Toxicologist		Employer (See Instructions) IES Engineers
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roden, Nicholas <hr/> Contributor address; City; State; Zip Code Scotch Plains, NJ 07076	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Toxicologist		Employer (See Instructions) IES Engineers

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 152/205 Rpt: 155/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Janice <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60614	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Quarles & Brady LLP
Date 05/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Janice <hr/> Contributor address; City; State; Zip Code Chicago, IL 60614	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Quarles & Brady LLP
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Janice <hr/> Contributor address; City; State; Zip Code Chicago, IL 60614	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Quarles & Brady LLP
Date 05/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogen, Laurie <hr/> Contributor address; City; State; Zip Code Floral Park, NY 11005	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogen, Laurie <hr/> Contributor address; City; State; Zip Code Floral Park, NY 11005	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 153/205 Rpt: 156/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolston, Lynn <hr/> 6 Contributor address; City; State; Zip Code Palm Springs, CA 92264	7 Amount of Contribution (\$) \$20.25
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romans, Susan <hr/> Contributor address; City; State; Zip Code Stowe, VT 05672	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romans, Susan <hr/> Contributor address; City; State; Zip Code Stowe, VT 05672	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rooker, Vicki <hr/> Contributor address; City; State; Zip Code Las Vegas, NV 89169	Amount of Contribution (\$) \$20.23
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rooker, Vicki <hr/> Contributor address; City; State; Zip Code Las Vegas, NV 89169	Amount of Contribution (\$) \$20.23
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 154/205 Rpt: 157/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenblatt, Jessica <hr/> 6 Contributor address; City; State; Zip Code Cambridge, MA 02139	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Media Designer		9 Employer (See Instructions) self
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenblatt, Jessica <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02139	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Media Designer		Employer (See Instructions) self
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roth, Andrea <hr/> Contributor address; City; State; Zip Code Oconomowoc, WI 53066	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) janitor		Employer (See Instructions) LA Maintenance
Date 05/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rothstein, Tracy <hr/> Contributor address; City; State; Zip Code Santa rosa beach, FL 32459	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rothstein, Tracy <hr/> Contributor address; City; State; Zip Code Santa rosa beach, FL 32459	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 155/205 Rpt: 158/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rotman, Toba <hr/> 6 Contributor address; City; State; Zip Code Flower Mound, TX 75028-3042	7 Amount of Contribution (\$) \$20.25
8 Principal occupation / Job title (See Instructions) piano teacher		9 Employer (See Instructions) self
Date 04/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Royce, Michael <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90064	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TV Writer/Producer		Employer (See Instructions) Snowpants Productions
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Royce, Michael <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90064	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TV Writer/Producer		Employer (See Instructions) Snowpants Productions
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Royce, Michael <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90064	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TV Writer/Producer		Employer (See Instructions) Snowpants Productions
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rushmer, Vera <hr/> Contributor address; City; State; Zip Code Ocean City, NJ 08226	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 156/205 Rpt: 159/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rushmer, Vera <hr/> 6 Contributor address; City; State; Zip Code Ocean City, NJ 08226	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutherford, Bruce <hr/> Contributor address; City; State; Zip Code Vashon, WA 98070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutherford, Bruce <hr/> Contributor address; City; State; Zip Code Vashon, WA 98070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sahm, Sharon <hr/> Contributor address; City; State; Zip Code Denton, TX 76202	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sahm, Sharon <hr/> Contributor address; City; State; Zip Code Denton, TX 76202	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 157/205 Rpt: 160/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sahm, Sharon <hr/> 6 Contributor address; City; State; Zip Code Denton, TX 76202	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sakakeeny, Robert <hr/> Contributor address; City; State; Zip Code WORCESTER, MA 01609	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sakakeeny, Robert <hr/> Contributor address; City; State; Zip Code WORCESTER, MA 01609	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sammann, Patricia <hr/> Contributor address; City; State; Zip Code Urbana, IL 61801	Amount of Contribution (\$) \$50.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santore, George <hr/> Contributor address; City; State; Zip Code Santa Maria, CA 93458	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 158/205 Rpt: 161/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saslow, Wayne <hr/> 6 Contributor address; City; State; Zip Code College Station, TX 77840	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) College Faculty		9 Employer (See Instructions) TAMU
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saslow, Wayne <hr/> Contributor address; City; State; Zip Code College Station, TX 77840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) College Faculty		Employer (See Instructions) TAMU
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scardino, Marjorie <hr/> Contributor address; City; State; Zip Code Bluffton, SC 29910	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scardino, Marjorie <hr/> Contributor address; City; State; Zip Code Bluffton, SC 29910	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schechter, Ruth <hr/> Contributor address; City; State; Zip Code Leawood, KS 66209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 159/205 Rpt: 162/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schechter, Ruth <hr/> 6 Contributor address; City; State; Zip Code Leawood, KS 66209	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Self
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schiff, David <hr/> Contributor address; City; State; Zip Code White Plains, NY 10605	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schiff, David <hr/> Contributor address; City; State; Zip Code White Plains, NY 10605	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schiller, Lisa <hr/> Contributor address; City; State; Zip Code New York, NY 10013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) art		Employer (See Instructions) self
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schiller, Lisa <hr/> Contributor address; City; State; Zip Code New York, NY 10013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) art		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 160/205 Rpt: 163/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schiller, Lisa <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10013	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) art		9 Employer (See Instructions) self
Date 05/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schloss, Sima <hr/> Contributor address; City; State; Zip Code New York, NY 10128	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Artist /Adjunct Professor		Employer (See Instructions) Hostos Community College
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schloss, Sima <hr/> Contributor address; City; State; Zip Code New York, NY 10128	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Artist /Adjunct Professor		Employer (See Instructions) Hostos Community College
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, Todd <hr/> Contributor address; City; State; Zip Code Cuyahoga Falls, OH 44221-1203	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schott, Saskia <hr/> Contributor address; City; State; Zip Code Mercer Island, WA 98040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 161/205 Rpt: 164/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schott, Saskia <hr/> 6 Contributor address; City; State; Zip Code Mercer Island, WA 98040	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schussler, Michael <hr/> Contributor address; City; State; Zip Code New York, NY 10023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schussler, Michael <hr/> Contributor address; City; State; Zip Code New York, NY 10023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schweitzer, Callie <hr/> Contributor address; City; State; Zip Code NY, NY 10028	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Programs manager		Employer (See Instructions) LinkedIn
Date 05/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Kent <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94304	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 162/205 Rpt: 165/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Kent <hr/> 6 Contributor address; City; State; Zip Code Palo Alto, CA 94304	7 Amount of Contribution (\$) \$85.00
8 Principal occupation / Job title (See Instructions) unemployed		9 Employer (See Instructions) unemployed
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Segura, Mary <hr/> Contributor address; City; State; Zip Code Hayward, CA 94541	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) State of California
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seidlitz, Alma <hr/> Contributor address; City; State; Zip Code IRVING, TX 75016	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HR Manager		Employer (See Instructions) Seidlitz Education
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seidlitz, Alma <hr/> Contributor address; City; State; Zip Code IRVING, TX 75016	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HR Manager		Employer (See Instructions) Seidlitz Education
Date 05/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Senders, Warren <hr/> Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) music teacher		Employer (See Instructions) self-employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 163/205 Rpt: 166/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Senders, Warren <hr/> 6 Contributor address; City; State; Zip Code Medford, MA 02155	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) music teacher		9 Employer (See Instructions) self-employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Senders, Warren <hr/> Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) music teacher		Employer (See Instructions) self-employed
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Senko, Jen <hr/> Contributor address; City; State; Zip Code New York, NY 10012	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sethi, Lida <hr/> Contributor address; City; State; Zip Code Columbus, OH 43204	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sethi, Lida <hr/> Contributor address; City; State; Zip Code Columbus, OH 43204	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 164/205 Rpt: 167/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sethi, Lida <hr/> 6 Contributor address; City; State; Zip Code Columbus, OH 43204	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shackelford, Kate <hr/> Contributor address; City; State; Zip Code Narberth, PA 19072	Amount of Contribution (\$) \$35.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shapiro, Andrew <hr/> Contributor address; City; State; Zip Code West Hurley, NY 12491	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Software consultant		Employer (See Instructions) Charles Hudson
Date 05/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, John <hr/> Contributor address; City; State; Zip Code Seattle, WA 98117	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Transportation Planner		Employer (See Instructions) City of Seattle
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, John <hr/> Contributor address; City; State; Zip Code Seattle, WA 98117	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Transportation Planner		Employer (See Instructions) City of Seattle

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 165/205 Rpt: 168/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheldon, Albert <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98105	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) physician		9 Employer (See Instructions) Self
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheldon, Albert <hr/> Contributor address; City; State; Zip Code Seattle, WA 98105	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) Self
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shenfield, Beverly <hr/> Contributor address; City; State; Zip Code Santa Clara, CA 95051	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shirkoff, Jean <hr/> Contributor address; City; State; Zip Code Portland, OR 97225	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) Self
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shirkoff, Jean <hr/> Contributor address; City; State; Zip Code Portland, OR 97225	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 166/205 Rpt: 169/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shirkoff, Jean <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97225	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Counselor		9 Employer (See Instructions) Self
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shivers, Nancy <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Shivers & Shivers
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shivers, Nancy <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Shivers & Shivers
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Short, Stephen <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30350	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Short, Steve <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30350	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VP of Sales		Employer (See Instructions) Verity Solutions

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 167/205 Rpt: 170/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shumway, Loretta <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77095	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Escrow Officer		9 Employer (See Instructions) MN Title Company
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shumway, Loretta <hr/> Contributor address; City; State; Zip Code Houston, TX 77095	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Escrow Officer		Employer (See Instructions) MN Title Company
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sikorski, John <hr/> Contributor address; City; State; Zip Code Mason, OH 45040	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silver, Bernard <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silver, Bernard <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 168/205 Rpt: 171/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sivret, Leslie-Anne <hr/> 6 Contributor address; City; State; Zip Code No, WA 98166	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Massage Therapist/cCranio-Sacreal Therapist		9 Employer (See Instructions) Self
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sivret, Leslie-Anne <hr/> Contributor address; City; State; Zip Code No, WA 98166	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Massage Therapist/cCranio-Sacreal Therapist		Employer (See Instructions) Self
Date 05/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sklower, Keith <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sklower, Keith <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Amy <hr/> Contributor address; City; State; Zip Code Gonzales, LA 70737	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ESL Teacher		Employer (See Instructions) QKids

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 169/205 Rpt: 172/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Amy <hr/> 6 Contributor address; City; State; Zip Code Gonzales, LA 70737	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) ESL Teacher		9 Employer (See Instructions) QKids
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kathleen <hr/> Contributor address; City; State; Zip Code Ontario, CA 91761-3867	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kathleen <hr/> Contributor address; City; State; Zip Code Ontario, CA 91761-3867	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kevin <hr/> Contributor address; City; State; Zip Code Verona, WI 53593	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) TEAM Resources
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kevin <hr/> Contributor address; City; State; Zip Code Verona, WI 53593	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) TEAM Resources

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 170/205 Rpt: 173/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Will <hr/> 6 Contributor address; City; State; Zip Code Ocean Springs, MS 39564	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Cardiothoracic Surgeon		9 Employer (See Instructions) USAF
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Will <hr/> Contributor address; City; State; Zip Code Ocean Springs, MS 39564	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Cardiothoracic Surgeon		Employer (See Instructions) USAF
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobol, Jennifer <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobol, Jennifer <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobol, Jennifer <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 171/205 Rpt: 174/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sochacki, Hilary <hr/> 6 Contributor address; City; State; Zip Code Sharon, MA 02067	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Sample Coordinator		9 Employer (See Instructions) American Holt Corp
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparkman, Elizabeth <hr/> Contributor address; City; State; Zip Code Denver, CO 80231	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Specht, Gladys <hr/> Contributor address; City; State; Zip Code Maineville, OH 45039	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Specht, Gladys <hr/> Contributor address; City; State; Zip Code Maineville, OH 45039	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Specht, Gladys <hr/> Contributor address; City; State; Zip Code Maineville, OH 45039	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 172/205 Rpt: 175/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Specht, Gladys <hr/> 6 Contributor address; City; State; Zip Code Maineville, OH 45039	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Specht, Gladys <hr/> Contributor address; City; State; Zip Code Maineville, OH 45039	Amount of Contribution (\$) \$100.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Specht, Gladys <hr/> Contributor address; City; State; Zip Code Maineville, OH 45039	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Specht, Gladys <hr/> Contributor address; City; State; Zip Code Maineville, OH 45039	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Specht, Gladys <hr/> Contributor address; City; State; Zip Code Maineville, OH 45039	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 173/205 Rpt: 176/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Specht, Gladys <hr/> 6 Contributor address; City; State; Zip Code Maineville, OH 45039	7 Amount of Contribution (\$) \$100.24
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Specht, Gladys <hr/> Contributor address; City; State; Zip Code Maineville, OH 45039	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Specht, Gladys <hr/> Contributor address; City; State; Zip Code Maineville, OH 45039	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprowls, David <hr/> Contributor address; City; State; Zip Code Portland, OR 97232	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) St John, Daniel <hr/> Contributor address; City; State; Zip Code Alameda, CA 94501	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 174/205 Rpt: 177/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) St John, Daniel <hr/> 6 Contributor address; City; State; Zip Code Alameda, CA 94501	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steelman, Sara <hr/> Contributor address; City; State; Zip Code INDIANA, PA 15701	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stegman, Cathy <hr/> Contributor address; City; State; Zip Code Seattle, WA 98136	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephenson, BB <hr/> Contributor address; City; State; Zip Code Boynton Beach, FL 33435	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephenson, BB <hr/> Contributor address; City; State; Zip Code Boynton Beach, FL 33435	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 175/205 Rpt: 178/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stogdill, James <hr/> 6 Contributor address; City; State; Zip Code Wayne, PA 19087	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stogdill, James <hr/> Contributor address; City; State; Zip Code Wayne, PA 19087	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stork-Knock, Deborah <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95829	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stork-Knock, Deborah <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95829	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stratten, Cheryl <hr/> Contributor address; City; State; Zip Code Denver, CO 80211	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 176/205 Rpt: 179/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stratten, Cheryl <hr/> 6 Contributor address; City; State; Zip Code Denver, CO 80211	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suczek, Marybelle <hr/> Contributor address; City; State; Zip Code South Padre Island, TX 78597	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suczek, Marybelle <hr/> Contributor address; City; State; Zip Code South Padre Island, TX 78597	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suczek, Marybelle <hr/> Contributor address; City; State; Zip Code South Padre Island, TX 78597	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sulzbacker, Marilyn <hr/> Contributor address; City; State; Zip Code New York, NY 10023-6538	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) clinical social worker		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 177/205 Rpt: 180/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sulzbacker, Marilyn <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10023-6538	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) clinical social worker		9 Employer (See Instructions) Self
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Surmik, Irene <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15213	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Rosemarie <hr/> Contributor address; City; State; Zip Code Bryan, TX 77801	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Rosemarie <hr/> Contributor address; City; State; Zip Code Bryan, TX 77801	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THeise, Neil <hr/> Contributor address; City; State; Zip Code New York, NY 10002	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) beth israel hospital

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 178/205 Rpt: 181/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tai, Jeanne 6 Contributor address; City; State; Zip Code Cambridge, MA 02140	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tai, Jeanne Contributor address; City; State; Zip Code Cambridge, MA 02140	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tang, Alex Contributor address; City; State; Zip Code Mountain View, CA 94043	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Volleyball Coach		Employer (See Instructions) Los Altos Mountain View School District
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Marlynda Contributor address; City; State; Zip Code Fort Worth, TX 76132	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Marlynda Contributor address; City; State; Zip Code Fort Worth, TX 76132	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 179/205 Rpt: 182/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tennenbaum, Gary <hr/> 6 Contributor address; City; State; Zip Code Basalt, CO 81621	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Pitkin county
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tennenbaum, Gary <hr/> Contributor address; City; State; Zip Code Basalt, CO 81621	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Pitkin county
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teplitz, Dona <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20910	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Jessica <hr/> Contributor address; City; State; Zip Code New York, NY 10040	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) musician		Employer (See Instructions) self
Date 05/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Jessica <hr/> Contributor address; City; State; Zip Code New York, NY 10040	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) musician		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 180/205 Rpt: 183/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Jessica 6 Contributor address; City; State; Zip Code New York, NY 10040	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) musician		9 Employer (See Instructions) self
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TiltonJones, Carrie Contributor address; City; State; Zip Code Portland, OR 97219	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) student writer		Employer (See Instructions) self
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TiltonJones, Carrie Contributor address; City; State; Zip Code Portland, OR 97219	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) student writer		Employer (See Instructions) self
Date 04/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tirana, Gail R Contributor address; City; State; Zip Code New York, NY 10024-5802	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) CUNY
Date 05/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tirana, Gail R Contributor address; City; State; Zip Code New York, NY 10024-5802	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) CUNY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 181/205 Rpt: 184/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tirana, Gail R <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10024-5802	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) teacher		9 Employer (See Instructions) CUNY
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trangucci, Neale <hr/> Contributor address; City; State; Zip Code Summit, NJ 07901	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Investment Research		Employer (See Instructions) Mason Capital
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trangucci, Neale <hr/> Contributor address; City; State; Zip Code Summit, NJ 07901	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Investment Research		Employer (See Instructions) Mason Capital
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Treur, Friday Gretchen <hr/> Contributor address; City; State; Zip Code Ventura, CA 93003	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Visitor Experience Lead		Employer (See Instructions) Museum of Ventura County
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Jennifer <hr/> Contributor address; City; State; Zip Code Houston, TX 77047	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) City

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 182/205 Rpt: 185/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77047	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Librarian		9 Employer (See Instructions) City
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Utset, Manuel <hr/> Contributor address; City; State; Zip Code Chicago, IL 60615	Amount of Contribution (\$) \$25.16
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) University of Illinois at Chicago
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Utset, Manuel <hr/> Contributor address; City; State; Zip Code Chicago, IL 60615	Amount of Contribution (\$) \$25.16
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) University of Illinois at Chicago
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Utset, Manuel <hr/> Contributor address; City; State; Zip Code Chicago, IL 60615	Amount of Contribution (\$) \$25.16
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) University of Illinois at Chicago
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Stone, Lisa <hr/> Contributor address; City; State; Zip Code Sunnyvale, CA 94087	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 183/205 Rpt: 186/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Stone, Lisa <hr/> 6 Contributor address; City; State; Zip Code Sunnyvale, CA 94087	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDevender, Nancy <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87109	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanDevender, Nancy <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87109	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasse, Emma <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasse, Emma <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 184/205 Rpt: 187/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasse, Emma 6 Contributor address; City; State; Zip Code Berkeley, CA 94707	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasse, Emma Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verrett, Franchesca Contributor address; City; State; Zip Code Rancho Cucamonga, CA 91737	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) RBM		Employer (See Instructions) Roche
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vilas, Faith Contributor address; City; State; Zip Code Seabrook, TX 77586	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Astronomer		Employer (See Instructions) PSI
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vilas, Faith Contributor address; City; State; Zip Code Seabrook, TX 77586	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Astronomer		Employer (See Instructions) PSI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 185/205 Rpt: 188/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villa-Komaroff, Lydia <hr/> 6 Contributor address; City; State; Zip Code CHESTNUT HILL, MA 02467	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) consultant		9 Employer (See Instructions) self
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villa-Komaroff, Lydia <hr/> Contributor address; City; State; Zip Code CHESTNUT HILL, MA 02467	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) self
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Florence <hr/> Contributor address; City; State; Zip Code Rainier, WA 98576	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Purchasing		Employer (See Instructions) Yelm Food Co-op
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Florence <hr/> Contributor address; City; State; Zip Code Rainier, WA 98576	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Purchasing		Employer (See Instructions) Yelm Food Co-op
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Florence <hr/> Contributor address; City; State; Zip Code Rainier, WA 98576	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Purchasing		Employer (See Instructions) Yelm Food Co-op

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 186/205 Rpt: 189/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Viviano, Jesse <hr/> 6 Contributor address; City; State; Zip Code Morrisville, NC 27560-6282	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Security Analyst		9 Employer (See Instructions) Verizon Business
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Viviano, Jesse <hr/> Contributor address; City; State; Zip Code Morrisville, NC 27560-6282	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Security Analyst		Employer (See Instructions) Verizon Business
Date 05/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, BJ <hr/> Contributor address; City; State; Zip Code Cape May, NJ 08204	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, BJ <hr/> Contributor address; City; State; Zip Code Cape May, NJ 08204	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waller, Margaret <hr/> Contributor address; City; State; Zip Code Claremont, CA 91711	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) Pomona College

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 187/205 Rpt: 190/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waller, Margaret <hr/> 6 Contributor address; City; State; Zip Code Claremont, CA 91711	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) professor		9 Employer (See Instructions) Pomona College
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh, Dee <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh, Dee <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wardell, Delaney <hr/> Contributor address; City; State; Zip Code Monroe, WA 98272	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Microsoft
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wardell, Delaney <hr/> Contributor address; City; State; Zip Code Monroe, WA 98272	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Microsoft

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 188/205 Rpt: 191/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warfield, Nancy <hr/> 6 Contributor address; City; State; Zip Code Greenbrae, CA 94904-1934	7 Amount of Contribution (\$) \$100.25
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warfield, Nancy <hr/> Contributor address; City; State; Zip Code Greenbrae, CA 94904-1934	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wattrus, Harald L & Louise P <hr/> Contributor address; City; State; Zip Code Santa Monica, CA 90405	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weinstein, Eliot <hr/> Contributor address; City; State; Zip Code Glencoe, IL 60022-1255	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions) University of Chicago
Date 05/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Howard P <hr/> Contributor address; City; State; Zip Code Newton, MA 02458	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 189/205 Rpt: 192/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Howard P 6 Contributor address; City; State; Zip Code Chestnut Hill, MA 02467	7 Amount of Contribution (\$) \$75.25
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Howard P Contributor address; City; State; Zip Code Newton, MA 02458	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westerlund, Trina Contributor address; City; State; Zip Code Bellevue, WA 98004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wharton, Jeanette Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wharton, Jeanette Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 190/205 Rpt: 193/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Lucille <hr/> 6 Contributor address; City; State; Zip Code Newport, RI 02840	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Lucille <hr/> Contributor address; City; State; Zip Code Newport, RI 02840	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Laura <hr/> Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Homer <hr/> Contributor address; City; State; Zip Code New York, NY 10027	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Homer <hr/> Contributor address; City; State; Zip Code New York, NY 10027	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 191/205 Rpt: 194/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Gayle <hr/> 6 Contributor address; City; State; Zip Code Reva, VA 22735	7 Amount of Contribution (\$) \$20.25
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self
Date 05/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Robert <hr/> Contributor address; City; State; Zip Code Oak Harbor, WA 98277	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Robert <hr/> Contributor address; City; State; Zip Code Oak Harbor, WA 98277	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winslow, Dylan <hr/> Contributor address; City; State; Zip Code Salt Lake City, UT 84102-2721	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Library Assistant		Employer (See Instructions) Salt Lake City Public Library
Date 05/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winslow, Dylan <hr/> Contributor address; City; State; Zip Code Salt Lake City, UT 84102-2721	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Library Assistant		Employer (See Instructions) Salt Lake City Public Library

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 192/205 Rpt: 195/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wise, Stephen <hr/> 6 Contributor address; City; State; Zip Code Cleveland, OH 44112	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wise, Stephen <hr/> Contributor address; City; State; Zip Code Cleveland, OH 44112	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Jasmine <hr/> Contributor address; City; State; Zip Code Coventry, CT 06238	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) retired massage therapist		Employer (See Instructions) self/retired
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Jasmine <hr/> Contributor address; City; State; Zip Code Coventry, CT 06238	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) retired massage therapist		Employer (See Instructions) self/retired
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodhull, Sara <hr/> Contributor address; City; State; Zip Code Mountain View, CA 94043	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Information Architect		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 193/205 Rpt: 196/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodhull, Sara <hr/> 6 Contributor address; City; State; Zip Code Mountain View, CA 94043	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Information Architect		9 Employer (See Instructions) Self
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodruff, Richard <hr/> Contributor address; City; State; Zip Code Denver, CO 80239-5067	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Word, Barbara <hr/> Contributor address; City; State; Zip Code Addison, TX 75001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Word, Barbara <hr/> Contributor address; City; State; Zip Code Addison, TX 75001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyatt, Roger B. <hr/> Contributor address; City; State; Zip Code Greenwich, NY 12834	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 194/205 Rpt: 197/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Mary <hr/> 6 Contributor address; City; State; Zip Code Gilroy, CA 95020	7 Amount of Contribution (\$) \$20.25
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yurgaites, Christine <hr/> Contributor address; City; State; Zip Code Vero Beach, FL 32966	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yurgaites, Christine <hr/> Contributor address; City; State; Zip Code Vero Beach, FL 32966	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yurgaites, Christine <hr/> Contributor address; City; State; Zip Code Vero Beach, FL 32966	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zorich, Robert <hr/> Contributor address; City; State; Zip Code Brookhaven, GA 30319	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 195/205 Rpt: 198/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) brody, robert <hr/> 6 Contributor address; City; State; Zip Code east hampton, NY 11937	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) brody, robert <hr/> Contributor address; City; State; Zip Code east hampton, NY 11937	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) dancona, amy <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19131	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) danforth, Elizabeth <hr/> Contributor address; City; State; Zip Code Bozeman, MT 59715	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Montana state university
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) danforth, Elizabeth <hr/> Contributor address; City; State; Zip Code Bozeman, MT 59715	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Montana state university

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 196/205 Rpt: 199/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ferrero, gail 6 Contributor address; City; State; Zip Code New York, NY 10027	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ferrero, gail Contributor address; City; State; Zip Code New York, NY 10027	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ferrero, gail Contributor address; City; State; Zip Code New York, NY 10027	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) francis, sally Contributor address; City; State; Zip Code Berkeley, CA 94708-1752	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) francis, sally Contributor address; City; State; Zip Code Berkeley, CA 94708-1752	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 197/205 Rpt: 200/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gassan, larry <hr/> 6 Contributor address; City; State; Zip Code Camarillo, CA 93010	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Photographer		9 Employer (See Instructions) Larry Gassan Photo/White Glove Scanning
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gassan, larry <hr/> Contributor address; City; State; Zip Code Camarillo, CA 93010	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions) Larry Gassan Photo/White Glove Scanning
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gassan, larry <hr/> Contributor address; City; State; Zip Code Camarillo, CA 93010	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions) Larry Gassan Photo/White Glove Scanning
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) hayes, matthew <hr/> Contributor address; City; State; Zip Code Highland Falls, NY 10928	Amount of Contribution (\$) \$100.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) henkin, michelle <hr/> Contributor address; City; State; Zip Code New Harbor, ME 04554	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 198/205 Rpt: 201/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) henkin, michelle <hr/> 6 Contributor address; City; State; Zip Code New Harbor, ME 04554	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) hess, cheryl <hr/> Contributor address; City; State; Zip Code berkeley, CA 94707	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) hess, cheryl <hr/> Contributor address; City; State; Zip Code berkeley, CA 94707	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) huckabay, kathleen <hr/> Contributor address; City; State; Zip Code Waikoloa, HI 96738	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) huckabay, kathleen <hr/> Contributor address; City; State; Zip Code Waikoloa, HI 96738	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 199/205 Rpt: 202/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) jorden, janice <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90024	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) koelle, tim <hr/> Contributor address; City; State; Zip Code ny, NY 10034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) malobe, jeff <hr/> Contributor address; City; State; Zip Code Ben Lomond, CA 95005	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) self
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) malobe, jeff <hr/> Contributor address; City; State; Zip Code Ben Lomond, CA 95005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) self
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) malobe, jeff <hr/> Contributor address; City; State; Zip Code Ben Lomond, CA 95005	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 200/205 Rpt: 203/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) malobe, jeff <hr/> 6 Contributor address; City; State; Zip Code Ben Lomond, CA 95005	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) consultant		9 Employer (See Instructions) self
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) malobe, jeff <hr/> Contributor address; City; State; Zip Code Ben Lomond, CA 95005	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) self
Date 05/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) miller, alan <hr/> Contributor address; City; State; Zip Code rockville, MD 20852	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions) Self
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) miller, alan <hr/> Contributor address; City; State; Zip Code rockville, MD 20852	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions) Self
Date 04/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) norcross, julie <hr/> Contributor address; City; State; Zip Code BOYNE CITY, MI 49712	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 201/205 Rpt: 204/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) norcross, julie <hr/> 6 Contributor address; City; State; Zip Code BOYNE CITY, MI 49712	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) norcross, julie <hr/> Contributor address; City; State; Zip Code BOYNE CITY, MI 49712	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ohlsson, garrick <hr/> Contributor address; City; State; Zip Code chicago, IL 60606	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) musician		Employer (See Instructions) self
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) owen, christina <hr/> Contributor address; City; State; Zip Code Los Gatos, CA 95031	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) owen, christina <hr/> Contributor address; City; State; Zip Code Los Gatos, CA 95031	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 202/205 Rpt: 205/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) paine, anne <hr/> 6 Contributor address; City; State; Zip Code Nashville, TN 37205	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) rabinor, Irene <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30342	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) rabinor, Irene <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30342	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) rammelkamp, abby <hr/> Contributor address; City; State; Zip Code baltimore, MD 21211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) rammelkamp, abby <hr/> Contributor address; City; State; Zip Code baltimore, MD 21211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 203/205 Rpt: 206/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) rammelkamp, abby <hr/> 6 Contributor address; City; State; Zip Code baltimore, MD 21211	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) rammelkamp, abby <hr/> Contributor address; City; State; Zip Code baltimore, MD 21211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) robbins-roth, cynthia <hr/> Contributor address; City; State; Zip Code san mateo, CA 94403	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) robbins-roth, cynthia <hr/> Contributor address; City; State; Zip Code san mateo, CA 94403	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) robbins-roth, cynthia <hr/> Contributor address; City; State; Zip Code san mateo, CA 94403	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 204/205 Rpt: 207/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) von Zuben, Antonia <hr/> 6 Contributor address; City; State; Zip Code Manhattan, NY 10021	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wasserman, michael <hr/> Contributor address; City; State; Zip Code seattle, WA 98103	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) chiropractor		Employer (See Instructions) self
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wasserman, michael <hr/> Contributor address; City; State; Zip Code seattle, WA 98103	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) chiropractor		Employer (See Instructions) self
Date 05/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) weil, karen <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94709	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) Artist at play
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) weil, karen <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94709	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) Artist at play

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 205/205 Rpt: 208/218
2 FILER NAME Rideshare 2 Vote		3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wilson, suzzette 6 Contributor address; City; State; Zip Code SUN CITY, CA 92586-0782	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wilson, suzzette Contributor address; City; State; Zip Code SUN CITY, CA 92586-0782	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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: 1/9 Rpt: 209/218	2 FILER NAME Rideshare 2 Vote	3 Filer ID (Ethics Commission Filers) 00084821
4 Date 04/29/2025	5 Payee name Act Blue Technical Service	
6 Amount (\$) \$81.06 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Donation Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/06/2025	Candidate/Officeholder name Office sought Office held	
Payee name Act Blue Technical Service		
Amount (\$) \$100.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Donation Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/13/2025	Candidate/Officeholder name Office sought Office held	
Payee name Act Blue Technical Service		
Amount (\$) \$103.89 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Donation Processing Fee
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: 2/9 Rpt: 210/218	2 FILER NAME Rideshare 2 Vote	3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/20/2025	5 Payee name Act Blue Technical Service	
6 Amount (\$) \$100.95 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Donation Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/28/2025	Candidate/Officeholder name Office sought Office held	
Payee name Act Blue Technical Service		
Amount (\$) \$302.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Donation Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Act Blue Technical Service		
Amount (\$) \$100.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Donation Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/9 Rpt: 211/218	2 FILER NAME Rideshare 2 Vote	3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/10/2025	5 Payee name Act Blue Technical Service	
6 Amount (\$) \$89.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Donation Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/17/2025	Candidate/Officeholder name Office sought Office held	
Payee name Act Blue Technical Service		
Amount (\$) \$637.64 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Donation Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/24/2025	Candidate/Officeholder name Office sought Office held	
Payee name Act Blue Technical Service		
Amount (\$) \$117.37 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Donation Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/9 Rpt: 212/218	2 FILER NAME Rideshare 2 Vote	3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/10/2025	5 Payee name Dorothy, Raizman	
6 Amount (\$) \$275.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 144 Kline Rd Ligonier, PA 15658	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Refund for donations received & reported in prior periods
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/03/2025	Payee name Marcia, Spray	
Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6 Wyndham Place Durham, NC 27705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Refund for donations received & reported in prior periods
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/05/2025	Payee name NGP VAN	
Amount (\$) \$342.22 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 655 - 15th Street, NW Suite 650 Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Data for fundraising
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: 5/9 Rpt: 213/218	2 FILER NAME Rideshare 2 Vote	3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/04/2025	5 Payee name NGP VAN	
6 Amount (\$) \$930.24 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 655 - 15th Street, NW Suite 650 Washington, DC 20005	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Data for fundraising
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 Paragon Solutions	
Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2141 East Broadway Road Suite 202 Tempe, AZ 85282	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Donation Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/02/2025	Payee name Paragon Solutions	
Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2141 East Broadway Road Suite 202 Tempe, AZ 85282	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Donation Processing Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/9 Rpt: 214/218	2 FILER NAME Rideshare 2 Vote	3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/30/2025	5 Payee name Resource One credit Union	
6 Amount (\$) \$35.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 12770 Coit Rd, Suite 100 Dallas, TX 75251	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank charges - low balance fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/16/2025	Candidate/Officeholder name Office sought Office held	
Payee name Resource One credit Union		
Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 12770 Coit Rd, Suite 100 Dallas, TX 75251	
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 Bank charges - low balance fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/25/2025	Candidate/Officeholder name Office sought Office held	
Payee name Rideshare2Vote LLC		
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 803648 Dallas, TX 75380	
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 Consulting Management and Operations
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/9 Rpt: 215/218	2 FILER NAME Rideshare 2 Vote	3 Filer ID (Ethics Commission Filers) 00084821
4 Date 05/06/2025	5 Payee name Rideshare2Vote LLC	
6 Amount (\$) \$25,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 803648 Dallas, TX 75380	
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 Consulting Management and Operations
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/22/2025	Candidate/Officeholder name Office sought Office held	
Payee name Rideshare2Vote LLC		
Amount (\$) \$20,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 803648 Dallas, TX 75380	
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 Consulting Management and Operations
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/02/2025	Candidate/Officeholder name Office sought Office held	
Payee name Rideshare2Vote LLC		
Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 803648 Dallas, TX 75380	
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 Consulting Management and Operations
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: 8/9 Rpt: 216/218	2 FILER NAME Rideshare 2 Vote	3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/03/2025	5 Payee name Rideshare2Vote LLC	
6 Amount (\$) \$20,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 803648 Dallas, TX 75380	
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 Consulting Management and Operations
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/10/2025	Candidate/Officeholder name Office sought Office held	
Payee name Rideshare2Vote LLC		
Amount (\$) \$20,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 803648 Dallas, TX 75380	
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 Consulting Management and Operations
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/17/2025	Candidate/Officeholder name Office sought Office held	
Payee name Rideshare2Vote LLC		
Amount (\$) \$40,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 803648 Dallas, TX 75380	
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 Consulting Management and Operations
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/9 Rpt: 217/218	2 FILER NAME Rideshare 2 Vote	3 Filer ID (Ethics Commission Filers) 00084821
4 Date 06/29/2025	5 Payee name Stanley, Ohara	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8560 Quail Oaks Drive Granite Bay, CA 95746	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Refund for donations received & reported in prior periods
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: 218/218

2 FILER NAME
Rideshare 2 Vote

3 Filer ID (Ethics Commission Filers)
00084821

4 Date 04/30/2025	5 Name of person from whom amount is received Resource One Credit Union	8 Amount (\$) \$340.30
	6 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75251	
	7 Purpose for which amount is received Bank interest <input type="checkbox"/> Check if political contribution returned to filer	

Date 05/31/2025	Name of person from whom amount is received Resource One Credit Union	Amount (\$) \$331.11
	Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75251	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

Date 06/30/2025	Name of person from whom amount is received Resource One Credit Union	Amount (\$) \$239.04
	Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75251	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	