

# 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) 00053715	2 Total pages filed: 35	
3 COMMITTEE NAME Annie's List			<b>OFFICE USE ONLY</b>	
			Date Received ELECTRONICALLY FILED 07/15/2025	
			Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address			ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 303277  Austin, TX 78703	
5 CAMPAIGN TREASURER NAME			MS / MRS / MR FIRST MI Piper	
			NICKNAME LAST SUFFIX Stege Nelson	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)			STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3206 Harris Park Ave.  Austin, TX 78705	
7 CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address			STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3206 Harris Park Ave.  Austin, TX 78705	
8 CAMPAIGN TREASURER PHONE			AREA CODE PHONE NUMBER EXTENSION (202) 812-0554	
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 05/29/2025 THROUGH Month Day Year 06/30/2025	
11 ELECTION			ELECTION DATE Month Day Year 03/03/2026	
			ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Annie's List		<b>13 Filer ID</b> (Ethics Commission Filers) 00053715
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
	<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold
<b>EXPENDITURE TOTALS</b>	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,403.01
	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 443.41
<b>CONTRIBUTION BALANCE</b>	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 25,683.23
	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 181,376.40
<b>OUTSTANDING LOAN TOTALS</b>	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

## 16 AFFIDAVIT

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

Piper Stege Nelson

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**SUBTOTALS - GPAC****FORM GPAC**  
**COVER SHEET PG 3**  
3 of 35

<b>17 COMMITTEE NAME</b> Annie's List		<b>18 Filer ID</b> (Ethics Commission Filers) 00053715
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,403.01
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	\$ 25,469.10
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 214.13
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	\$ 496.14

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/25 Rpt: 4/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aden, Marilyn <hr/> <b>6</b> Contributor address; City; State; Zip Code  New Braunfels, TX 78130-7960	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Stacy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-4157	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashworth, Susan <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746-4613	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, John <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-1858	Amount of Contribution (\$)  \$10.53
Principal occupation / Job title (See Instructions) Non Profit Professional		Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, John <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-1858	Amount of Contribution (\$)  \$10.53
Principal occupation / Job title (See Instructions) Non Profit Professional		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/25 Rpt: 5/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banister, Simin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77019-2509	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bean, Nancy Cozette <hr/> Contributor address; City; State; Zip Code  Arlington, TX 76006-4003	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) educator		Employer (See Instructions)
Date 06/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaver, Becky <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-6200	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benavides, Melissa <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78209-5271	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blakemore, James J. <hr/> Contributor address; City; State; Zip Code  Greenbrier, TN 37073-4797	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/25 Rpt: 6/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blau, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78757-8134	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braunagel-Brown, Mary A. (Dr.) <hr/> Contributor address; City; State; Zip Code  Austin, TX 78736-3319	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Angela <hr/> Contributor address; City; State; Zip Code  Denton, TX 76207-1288	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 05/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Royce <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-4587	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Royce <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-4587	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/25 Rpt: 7/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Elizabeth J <hr/> <b>6</b> Contributor address; City; State; Zip Code  Big Spring, TX 79721-0509	<b>7</b> Amount of Contribution (\$)  \$3.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaussee, John <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75235-1611	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Senior Director		Employer (See Instructions)
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chevalier, Joi <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-2345	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiarito, Bebe <hr/> Contributor address; City; State; Zip Code  Portland, OR 97231-2600	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiarito, Bebe <hr/> Contributor address; City; State; Zip Code  Portland, OR 97231-2600	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/25 Rpt: 8/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christian, Ann <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76109-2049	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Certified Academic Language Therapist		<b>9</b> Employer (See Instructions)
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Melinda <hr/> Contributor address; City; State; Zip Code  Houston, TX 77227-2337	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Cathy <hr/> Contributor address; City; State; Zip Code  Houston, TX 77009-7131	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Health Educator		Employer (See Instructions)
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Nancy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-4025	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions)
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeCoux, Beverlee <hr/> Contributor address; City; State; Zip Code  Alamo, TX 78516-2604	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/25 Rpt: 9/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dell, Marci <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-5097	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dibrell, Lauri <hr/> Contributor address; City; State; Zip Code  Texas City, TX 77591-7000	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions)
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorris, Ann <hr/> Contributor address; City; State; Zip Code  Huntsville, TX 77320-3439	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudley, Jaquelin <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-8025	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott-Smart, Patricia <hr/> Contributor address; City; State; Zip Code  Abilene, TX 79605-4916	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/25 Rpt: 10/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erickson, Quincy <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-5147	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Chef		<b>9</b> Employer (See Instructions)
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Escobar, Analysse Contributor address; City; State; Zip Code  Washington, DC 20002-7373	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) White house liaison		Employer (See Instructions)
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estabrook, Helen Contributor address; City; State; Zip Code  Houston, TX 77019-3540	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flanagan, Mary Contributor address; City; State; Zip Code  San Antonio, TX 78209-3702	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Organizational Development Consultant		Employer (See Instructions)
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fossler, Kerry Contributor address; City; State; Zip Code  Bastrop, TX 78602-2135	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/25 Rpt: 11/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Michael <hr/> <b>6</b> Contributor address; City; State; Zip Code  Chicago, IL 60637-3812	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Manager		<b>9</b> Employer (See Instructions)
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowles, Nicole <hr/> Contributor address; City; State; Zip Code  Helotes, TX 78023-4168	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freer, Jill <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76107-2236	Amount of Contribution (\$)  \$23.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Furlong, Alexandra <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-5206	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Furlong, Alexandra <hr/> Contributor address; City; State; Zip Code  Austin, TX 78731-5206	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/25 Rpt: 12/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garber, Martha <hr/> <b>6</b> Contributor address; City; State; Zip Code  Coppell, TX 75019-5820	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Danna <hr/> Contributor address; City; State; Zip Code  Amarillo, TX 79110-1635	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Donor Services		Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Danna <hr/> Contributor address; City; State; Zip Code  Amarillo, TX 79110-1635	Amount of Contribution (\$)  \$2.50
Principal occupation / Job title (See Instructions) Donor Services		Employer (See Instructions)
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Roland <hr/> Contributor address; City; State; Zip Code  Houston, TX 77042-2501	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaynor, Yvette Houlihan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77024-2704	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/25 Rpt: 13/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giles, Al <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78763-0360	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glassner, Sharon <hr/> Contributor address; City; State; Zip Code  Morton Grove, IL 60053-1562	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenfield, Stuart J <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-6811	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Lecturer		Employer (See Instructions)
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Andrea <hr/> Contributor address; City; State; Zip Code  Houston, TX 77009-6629	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) fundraising		Employer (See Instructions)
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hampton, Linda <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-3968	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/25 Rpt: 14/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanks, Kendyl <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704-3624	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions)
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Lis Contributor address; City; State; Zip Code  Houston, TX 77030-2028	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Senior Client and Project Manager		Employer (See Instructions)
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Rev. Jody Contributor address; City; State; Zip Code  Austin, TX 78748-3106	Amount of Contribution (\$)  \$20.85
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Adam Contributor address; City; State; Zip Code  Houston, TX 77006-4218	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holzer, Jean Contributor address; City; State; Zip Code  Galveston, TX 77551-1745	Amount of Contribution (\$)  \$18.00
Principal occupation / Job title (See Instructions) systems & data analyst		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/25 Rpt: 15/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Elaine <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77025-3663	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Victoria <hr/> Contributor address; City; State; Zip Code  La Mesa, CA 91941-8047	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson-Blalock, Jennifer <hr/> Contributor address; City; State; Zip Code  New York, NY 10001-6261	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) literary agent		Employer (See Instructions)
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, STEPHEN <hr/> Contributor address; City; State; Zip Code  Houston, TX 77061-3831	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, STEPHEN <hr/> Contributor address; City; State; Zip Code  Houston, TX 77061-3831	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/25 Rpt: 16/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karempudi, Sahiti <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78702-5425	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) program coordinator		<b>9</b> Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karempudi, Sahiti <hr/> Contributor address; City; State; Zip Code  Austin, TX 78702-5425	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) program coordinator		Employer (See Instructions)
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenton, John <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78239-3097	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenton, John <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78239-3097	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khoslas, Joan <hr/> Contributor address; City; State; Zip Code  Houston, TX 77292-0720	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/25 Rpt: 17/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klise, Sonja <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fulshear, TX 77441-1432	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Joint Venture Auditor		<b>9</b> Employer (See Instructions)
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) L Cook, Terry <hr/> Contributor address; City; State; Zip Code  Houston, TX 77079-4225	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWREY, AMY L <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-2412	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lambert, Ruth <hr/> Contributor address; City; State; Zip Code  Melbourne, FL 32940-6815	Amount of Contribution (\$)  \$22.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law, Linda <hr/> Contributor address; City; State; Zip Code  Austin, TX 78729-7563	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/25 Rpt: 18/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Le, Mai <b>6</b> Contributor address; City; State; Zip Code  Sunnyvale, CA 94087-5202	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions)
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leff, Debra S Contributor address; City; State; Zip Code  Austin, TX 78756-3525	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lervisit, Woot Contributor address; City; State; Zip Code  Dallas, TX 75243-4001	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lester, Jim Contributor address; City; State; Zip Code  Bogata, TX 75417-2806	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lester, Jim Contributor address; City; State; Zip Code  Bogata, TX 75417-2806	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/25 Rpt: 19/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/22/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowery, Sandra S. <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77024-8001	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Sales		<b>9</b> Employer (See Instructions)
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucido, Rita <hr/> Contributor address; City; State; Zip Code  Houston, TX 77002-1741	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions)
Date 06/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madden, Judy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78216-7708	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Stephen <hr/> Contributor address; City; State; Zip Code  Pinole, CA 94564-1220	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Stephen <hr/> Contributor address; City; State; Zip Code  Pinole, CA 94564-1220	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/25 Rpt: 20/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Spencer <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77084-4312	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayo, Donna <hr/> Contributor address; City; State; Zip Code  Belmont, MA 02478-1947	Amount of Contribution (\$)  \$7.00
Principal occupation / Job title (See Instructions) Management consultant		Employer (See Instructions)
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormack, Maureen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-1949	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 06/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuffey, Barbara Shivers <hr/> Contributor address; City; State; Zip Code  Houston, TX 77004-5938	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIlheran, Sarah <hr/> Contributor address; City; State; Zip Code  Austin, TX 78734-1525	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Physical Therapist		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/25 Rpt: 21/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellon-Werch, Michelle <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78759-4723	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Assistant GC		<b>9</b> Employer (See Instructions)
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellon-Werch, Michelle <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-4723	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Assistant GC		Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellon-Werch, Michelle <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-4723	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Assistant GC		Employer (See Instructions)
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mesman, Caroline <hr/> Contributor address; City; State; Zip Code  Florence, OR 97439-9298	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mix, Darcy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78212-2346	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/25 Rpt: 22/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neavel, Nancy Trager <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703-1159	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nettles, Scott Contributor address; City; State; Zip Code  San Francisco, CA 94114-2829	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 06/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Cheryl Contributor address; City; State; Zip Code  Arlington, TX 76011-2620	Amount of Contribution (\$)  \$5.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noble, Shannon Contributor address; City; State; Zip Code  Austin, TX 78735-6605	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul, Mary Anna Contributor address; City; State; Zip Code  Austin, TX 78746-7871	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Real estate broker		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/25 Rpt: 23/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perrenod, William <b>6</b> Contributor address; City; State; Zip Code  New Orleans, LA 70117-5727	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Nonprofit Business Consultant		<b>9</b> Employer (See Instructions)
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Linda Contributor address; City; State; Zip Code  Austin, TX 78757-1830	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polito, Catherine Contributor address; City; State; Zip Code  Austin, TX 78759-5001	Amount of Contribution (\$)  \$20.85
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pringle-Smith, Gloria Contributor address; City; State; Zip Code  Dallas, TX 75216-6616	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Annette Contributor address; City; State; Zip Code  Houston, TX 77007-8266	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Public Official		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/25 Rpt: 24/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Sandra Lemcke <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77006-6166	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions)
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Joanne <hr/> Contributor address; City; State; Zip Code  Austin, TX 78750-8202	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Jean <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76137-2058	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Jean <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76137-2058	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, Mary Esther <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005-4332	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/25 Rpt: 25/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Nancy <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78232-1301	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Nancy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78232-1301	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarath, Patrice <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-3036	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions)
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarath, Patrice <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757-3036	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions)
Date 06/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sawyer, Robin <hr/> Contributor address; City; State; Zip Code  Mclean, VA 22102-5864	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Programs Manager		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/25 Rpt: 26/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaffer, Diane <hr/> <b>6</b> Contributor address; City; State; Zip Code  Ashland, OR 97520-3454	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions)
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharpe, Mary <hr/> Contributor address; City; State; Zip Code  Austin, TX 78703-2833	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Planning Facilitator		Employer (See Instructions)
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith-Connell, Kathryn <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60626-6943	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solomon, Linda <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-8821	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steinbomer, Robert <hr/> Contributor address; City; State; Zip Code  Lockhart, TX 78644-2433	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/25 Rpt: 27/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steinwedell, Patricia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78746-6986	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Finance		<b>9</b> Employer (See Instructions)
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wingate, Elizabeth <hr/> Contributor address; City; State; Zip Code  Valdez, AK 99686-1503	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weinstein, Hilary <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76107-2795	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weinstein, Hilary <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76107-2795	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Ron <hr/> Contributor address; City; State; Zip Code  Nashville, TN 37211-6699	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/25 Rpt: 28/35
<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 05/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitten, Lynn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704-3101	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) systems analyst		<b>9</b> Employer (See Instructions)
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitten, Lynn <hr/> Contributor address; City; State; Zip Code  Austin, TX 78704-3101	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) systems analyst		Employer (See Instructions)
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willis, Taylor <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76110-1110	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Carlecia D. <hr/> Contributor address; City; State; Zip Code  Houston, TX 77018-1415	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) watkins, doris <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76110-1741	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Tarrant County Family Court Services		Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/5 Rpt: 29/35	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/02/2025	<b>5</b> Payee name Blue Scout Digital	
<b>6</b> Amount (\$) \$1,400.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2505 Royal Birkdale Dr  Plano, TX 75025-5067	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital fundraising consulting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/12/2025	Candidate/Officeholder name Blue Scout Digital	
Amount (\$) \$1,900.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2505 Royal Birkdale Dr  Plano, TX 75025-5067	
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 Digital fundraising consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/30/2025	Candidate/Officeholder name Doody, Dylan	
Amount (\$) \$1,750.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1667 Dutch Hill Rd  Tully, NY 13159-3042	
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 General consulting
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.

<b>1</b> Total pages Schedule F1: Sch: 2/5 Rpt: 30/35	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/30/2025	<b>5</b> Payee name Flagship Campaigns	
<b>6</b> Amount (\$) \$750.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 7926 Broadway Apt 707 San Antonio, TX 78209-2613	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Humana Inc.		
Amount (\$) \$252.15  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 4612 Carol Stream, IL 60197-4612	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Health insurance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/30/2025	Candidate/Officeholder name Office sought Office held	
Payee name Humana Inc.		
Amount (\$) \$105.53  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 4612 Carol Stream, IL 60197-4612	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/5 Rpt: 31/35	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/04/2025	<b>5</b> Payee name Humana Inc.	
<b>6</b> Amount (\$) \$2,053.21  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 4612  Carol Stream, IL 60197-4612	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dabase software
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/02/2025	Candidate/Officeholder name Prosperity Bank	
Amount (\$) \$2,086.92  <input type="checkbox"/> Expenditure from corporate funds	Office sought PO Box 660525  Dallas, TX 75266-0525	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/10/2025	Candidate/Officeholder name Prosperity Bank	
Amount (\$) \$1,366.00  <input type="checkbox"/> Expenditure from corporate funds	Office sought PO Box 660525  Dallas, TX 75266-0525	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
Complete <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.

<b>1</b> Total pages Schedule F1: Sch: 4/5 Rpt: 32/35	<b>2</b> FILER NAME Annie's List	<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> Date 06/04/2025	<b>5</b> Payee name Susan Harry Consulting	
<b>6</b> Amount (\$) \$750.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 301074  Austin, TX 78703-0018	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance Consulting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/04/2025	Candidate/Officeholder name Office sought Office held	
Payee name Susan Harry Consulting		
Amount (\$) \$750.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 301074  Austin, TX 78703-0018	
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 Compliance Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/29/2025	Candidate/Officeholder name Office sought Office held	
Payee name Tony's		
Amount (\$) \$7,212.78  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3755 Richmond Ave.  Houston 77046 Namibia	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Catering for event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 33/35	2 FILER NAME Annie's List	3 Filer ID (Ethics Commission Filers) 00053715
4 Date 06/11/2025	5 Payee name United HealthCare	
6 Amount (\$) \$4,649.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1250 S Capital of Texas Hwy Bldg 1 West Lake Hills, TX 78746-6446	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Health insurance
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

## EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 1/1 Rpt: 34/35	<b>2</b> FILER NAME Annie's List		<b>3</b> Filer ID (Ethics Commission Filers) 00053715
<b>4</b> CREDIT CARD ISSUER	Name of financial institution Prosperity Bank		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b> PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$214.13	(b) Date of Charge 06/30/2025	(c) Date(s) Credit Card Issuer Paid
<b>7</b> PAYEE	(a) Payee name Prosperity Bank		(b) Payee address; City, State, Zip Code PO Box 660525 Dallas, TX 75266-0525
<b>8</b> PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Interest
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

# 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: 35/35

2 FILER NAME  
Annie's List

3 Filer ID (Ethics Commission Filers)  
00053715

4 Date 06/30/2025	5 Name of person from whom amount is received Plains Capital	8 Amount (\$) \$244.22
	6 Address of person from whom amount is received; City; State; Zip Code  Austin, TX 78758	
	7 Purpose for which amount is received interest <input type="checkbox"/> Check if political contribution returned to filer	

Date 05/30/2025	Name of person from whom amount is received Plains Capital	Amount (\$) \$251.92
	Address of person from whom amount is received; City; State; Zip Code  Austin, TX 78758	
	Purpose for which amount is received interest <input type="checkbox"/> Check if political contribution returned to filer	