CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

| | | | 1 Filer ID | | 2 Total page | s filod: |
|---------------------------------------|-----------------------------|-----------------|--------------------------|--------------------|------------------|-------------------------|
| The C/OH Instruction | Guide explains how to compl | ete this form. | Ethics Commi 00081913 | , | | 272 |
| 3 CANDIDATE / | MS / MRS / MR | FIRST | | MI | OFFIC | E USE ONLY |
| OFFICEHOLDER NAME | The Honorable | James | | | Date Received | |
| | | | | | | ICALLY FILED |
| | | | | | | |
| | NICKNAME | LAST | | SUFFIX | 07/15/2025 | |
| | | Talarico | | | | |
| 4 CANDIDATE / | ADDRESS / PO BOX; APT | / SUITE #; CIT | -Y: | ZIP CODE | Date Hand-delive | red or Date Postmarked |
| OFFICEHOLDER | PO Box 15207 | | - , | | | |
| MAILING ADDRESS | | | | | Receipt # | Amount |
| | | | | | | |
| Change of Address | Austin, TX 78761 | | | | Date Processed | |
| | | | | | | |
| | | | | | Date Imaged | |
| | | | | | | |
| 5 CAMPAIGN | MS / MRS / MR | FIRST | | MI | | |
| TREASURER | Mrs. | Susan | | | | |
| NAME | | | | | | |
| | NICKNAME | LAST | | SUFFIX | | |
| | | Gezana | | 30111X | | |
| | | Oczana | | | | |
| • • • • • • • • • • • • • • • • • • • | | | | | | |
| 6 CAMPAIGN TREASURER | STREET ADDRESS (NO PO | BOX PLEASE); | AP | r / SUITE #; CITY; | | STATE; ZIP CODE |
| ADDRESS | 2231 Margalene Way | | | | | |
| (Residence or Business) | | | | | | |
| | Austin, TX 78728 | | | | | |
| | | | | | | |
| | | | | | | |
| 7 CAMPAIGN TREASURER | | IE NUMBER | EXTENSION | | | |
| PHONE | (512) 484-3528 | | | | | |
| a | | | | | | |
| 8 REPORT TYPE | January 15 | 30th day before | | Runoff | 15th day afte | er campaign treasurer |
| | | Sour day below | | | | (officeholder only) |
| | X July 15 | 8th day before | election | Exceeded modified | Final Report | (Attach C/OH-FR) |
| | | _ | | reporting limit | - | |
| 9 PERIOD | Month Day Year | | | Month Day | Year | |
| COVERED | 01/01/2025 | Tł | HROUGH | 06/30/202 | 5 | |
| | | | | | | |
| 10 ELECTION | ELECTION DATE | | | ELECTION TYPE | | |
| | Month Day Year | | Primary | Runoff | Other | |
| | | | General | Special | | |
| | | | | | | |
| | | | | | (if knows) | |
| 11 OFFICE | OFFICE HELD (if any) | riot EO | | 12 OFFICE SOUGHT | (II KNOWN) | |
| | State Representative Dist | fict 50 | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | GO 1 | FO PAGE 2 | | | |
| L Forms provided by Te | exas Ethics Commission | www.et | hics.state.tx.u | S | \ | /ersion V4.1.0.f10d0fd8 |
| | | | | - | • | |

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

Talarico, James (The Honorable)

13 C / OH NAME

FORM C/OH **COVER SHEET PG 2** 2 of 272

(Ethics Commission Filers)

14 Filer ID

| | | | 00081913 | | | | |
|--|----------------------------------|---|---|------------------------|--|--|--|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) | candidate / officeholder. | political contributions accepted or political expenditu These expenditures may have been made without a d officeholders are required to report this information | the candidate's or officeho | older's knowledge or | | | |
| Additional Pages | COMMITTEE TYPE COMMITTEE NAME | | | | | | |
| | GENERAL | | | | | | |
| | | COMMITTEE ADDRESS | | | | | |
| | SPECIFIC | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | COMMITTEE CAMPAIGN TREASURER NAME | | | | | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRES | | | | | |
| | | | | | | | |
| 16 CONTRIBUTION TOTALS | | | | | | | |
| | | CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS | 3) | \$ 90,825.16 | | | |
| EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS | | | | \$ 0.00 | | | |
| | | \$ 30,263.61 | | | | | |
| CONTRIBUTION BALANCE | 5. TOTAL POLITIC REPORTING PE | AL CONTRIBUTIONS MAINTAINED AS OF THE LERIOD | AST DAY OF THE | \$ 697,679.01 | | | |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIE OF THE REPOF | PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD | OF THE LAST DAY | \$ 0.00 | | | |
| 17 AFFIDAVIT | • | | | | | | |
| | | I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code. | | | | | |
| | | The Hono | orable James Talarico | | | | |
| | | | Candidate or Officeholde | r | | | |
| | | | | | | | |
| AFFIX NO | TARY STAMP / SEAL AB | OVE | | | | | |
| Sworn to and subso | cribed before me, by the s | aid | . this the | day | | | |
| | | ertify which, witness my hand and seal of office. | , , , , , , , , , , , , , , , , , | | | | |
| | | | | | | | |
| Signature of offic | er administering | Printed name of officer administering | Title of officer a | dministering oath | | | |
| Forms provided by Te | xas Ethics Commission | n www.ethics.state.tx.us | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | ersion V4.1.0.f10d0fd8 | | | |

| S | UBT | OTALS - C/OH | С | FORM C/OH OVER SHEET PG 3 3 of 272 |
|----|--------|---|--------------------------------|--|
| | ER NAM | /E James (The Honorable) | 19 Filer ID 00081913 | (Ethics Commission Filers) |
| | | E SUBTOTALS SCHEDULE | 1 | SUBTOTAL AMOUNT |
| 1. | Х | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ 90,825.16 |
| 2. | | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ |
| 3. | | SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ |
| 4. | | SCHEDULE E: LOANS | | \$ |
| 5. | Х | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | S | \$ 30,263.61 |
| 6. | | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ |
| 7. | | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI | ONS | \$ |
| 8. | | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ |
| 9. | | SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | | \$ |
| 10 | | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS | OF C/OH | \$ |
| 11 | | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | ONS | \$ |
| 12 | | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER | RETURNED | \$ |
| | | | | |

| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1: Sch: 1/228 Rpt: 4/272 |
|--|---|
| 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Talarico, James (The Honorable) | 00081913 |
| 4 Date 5 Full name of contributor out-of-state PAC (ID#: |) 7 Amount of Contribution (\$) |
| 06/30/2025 A Magee, Stephanie | \$5.00 |
| 6 Contributor address; City; State; Zip Code | |
| | |
| | |
| Dumfries, VA 22026 | |
| 8 Principal occupation / Job title (See Instructions) 9 Employer (See Inst | |
| Accountant National Commit | tee for Quality Assurance |
| Date Full name of contributor out-of-state PAC (ID#: |) Amount of Contribution (\$) |
| 06/30/2025 Abernathy, Gregg | \$100.00 |
| Contributor address; City; State; Zip Code | |
| | |
| | |
| Austin, TX 78703 | |
| Principal occupation / Job title (See Instructions) Employer (See Inst | tructions) |
| Mother Mother | |
| Date Full name of contributor out-of-state PAC (ID#: |) Amount of Contribution (\$) |
| 06/26/2025 Absalom, Katelyn | \$3.00 |
| Contributor address; City; State; Zip Code | |
| | |
| | |
| Dallas, TX 75252 | |
| Principal occupation / Job title (See Instructions) Employer (See Inst | tructions) |
| Student Texas Women's | University |
| Date Full name of contributor out-of-state PAC (ID#: |) Amount of Contribution (\$) |
| 06/25/2025 Adair, David | \$20.00 |
| Contributor address; City; State; Zip Code | |
| | |
| | |
| Austin, TX 78709 | |
| Principal occupation / Job title (See Instructions) Employer (See Inst | tructions) |
| CPA DAVID ADAIR C | PA |
| Date Full name of contributor out-of-state PAC (ID#: |) Amount of Contribution (\$) |
| 06/29/2025 Adair, David | \$50.00 |
| Contributor address; City; State; Zip Code | |
| | |
| | |
| Austin, TX 78709 | |
| Principal occupation / Job title (See Instructions) Employer (See Inst | tructions) |
| | |
| CPA DAVID ADAIR C | |
| CPA DAVID ADAIR C | |

| The Instru | ction Guide explains how to complete th | is form. | 1 Total pages Schedule A1: Sch: 2/228 Rpt: 5/272 |
|----------------|--|-----------------------------|---|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | nes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (I | D#:) | 7 Amount of Contribution (\$) |
| 06/23/2025 | Adair, Sandra | | \$25.00 |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Austin, TX 78759 | | |
| | pation / Job title (See Instructions) | 9 Employer (See Instruction | is) |
| Film editor | | Free lance | |
| Date | Full name of contributor out-of-state PAC (I | D#:) | Amount of Contribution (\$) |
| 06/30/2025 | Adams, Eloise | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Nacogdoches, TX 75961 | | |
| | ipation / Job title (See Instructions) | Employer (See Instruction | s) |
| Not Employe | | Not Employed | |
| Date | Full name of contributor Out-of-state PAC (I | D#:) | Amount of Contribution (\$) |
| 06/29/2025 | Adams, Jerra | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | San Marcos, TX 78666 | | |
| | ipation / Job title (See Instructions) | Employer (See Instruction | 5) |
| Not Employe | | Not Employed | 1 |
| Date | | D#:) | Amount of Contribution (\$) |
| 06/29/2025 | Adams, Melissa | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | San Antonio, TX 78212 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruction | |
| Banker | | Frost Bank | 5) |
| | | | |
| Date | Full name of contributor out-of-state PAC (I | D#:) | Amount of Contribution (\$) |
| 06/30/2025 | Adams, Patricia | | \$5.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Plainville, CT 06062 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruction | s) |
| Not employe | | Not employed | -, |
| | | | |
| | | | |

| ר | The Instru | ction Guide explains how to complete thi | s form. | 1 | Total pages Schedule A1: Sch: 3/228 Rpt: 6/272 | |
|------------|-------------------------------|---|--|----------|---|---------|
| 2 F | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| ר | Talarico, Jar | nes (The Honorable) | | | 00081913 | |
| 4 C | Date | 5 Full name of contributor out-of-state PAC (II | D#:) | 7 | Amount of Contribution (\$) | |
| C | 06/30/2025 | Aday, Savannah M | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | Ϊ | | |
| | | | | | | |
| <u> </u> | | Austin, TX 78704 | | Ĺ | | |
| | Principal occu Not Employe | ipation / Job title (See Instructions) ed | 9 Employer (See Instructions Not Employed | .s) | | |
| [| Date | Full name of contributor out-of-state PAC (II | D#:) | T | Amount of Contribution (\$) | |
| C | 06/30/2025 | Addcox, Beverly | | | | \$5.00 |
| | | Contributor address; City; State; Zip Code | | " | | |
| | | Friendswood, TX 77546 | | | | |
| | • | ipation / Job title (See Instructions) | Employer (See Instructions | ıS) | | |
| V | web designe | · · · · · · · · · · · · · · · · · · · | self employed | <u> </u> | | |
| | Date | | D#:) | | Amount of Contribution (\$) | |
| C | 06/23/2025 | Adelman, Lori | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | Austin, TX 78727 | | | | |
| F | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | ls) | | |
| ٢ | Not Employe | 2d | Not Employed | | | |
| Г Т | Date | Full name of contributor out-of-state PAC (II | | Τ | Amount of Contribution (\$) | |
| (| 06/23/2025 | Aguilar, Aurora | | | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | Redmond, WA 98052 | | | | |
| | Principal occu Technician | ipation / Job title (See Instructions) | Employer (See Instructions Kuiper Amazon | ıs) | | |
| [| Date | Full name of contributor out-of-state PAC (II | D#:) | Τ | Amount of Contribution (\$) | |
| C | 06/26/2025 | Aksoy, Darlene | | | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | Coppell, TX 75019 | | | | |
| F | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | ls) | | |
| 1 | Not Employe | be | Not Employed | | | |
| | | | | | | |

| The Instruction Guide | explains how to complete th | nis form. | 1 Total pages Schedule A1: Sch: 4/228 Rpt: 7/272 | |
|--|-------------------------------------|--|---|-----------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission | ı Filers) |
| Talarico, James (The Hond | orable) | | 00081913 | |
| 4 Date 5 Full name o | of contributor out-of-state PAC | (ID#:) | 7 Amount of Contribution (\$) | |
| 06/30/2025 Al-Mashou | | | | \$25.00 |
| 6 Contributor | address; City; State; Zip Code | | | |
| | | | | |
| Dfluererill | | | | |
| | e, TX 78660 | Construction | <u> </u> | |
| 8 Principal occupation / Job title IT | (See Instructions) | 9 Employer (See Instructions City of Austin | S) | |
| | | | | |
| | | (ID#:) | Amount of Contribution (\$) | ±10.00 |
| 06/30/2025 Alaniz, As | - | | | \$10.00 |
| Contributor | address; City; State; Zip Code | | | |
| | | | | |
| Conroe, T | X 772U3 | | | |
| Principal occupation / Job title | | Employer (See Instructions | <u> </u> | |
| Senior Demand Planner | | Hims & Hers | 5) | |
| | | | Amount of Contribution (ft) | |
| | of contributor out-of-state PAC (| (ID#:) | Amount of Contribution (\$) | ቀደብ በበ |
| 06/30/2025 Alden, Hea | | | | \$50.00 |
| Contributor | address; City; State; Zip Code | | | |
| | | | | |
| Austin, TX | 78751 | | | |
| Principal occupation / Job title | | Employer (See Instructions | <u> </u> s) | |
| Nonprofit Management | | self | -, | |
| Date Full name o | of contributor Out-of-state PAC (| (ID#:) | Amount of Contribution (\$) | |
| 06/30/2025 Allen Esq. | | (10#) | | \$25.00 |
| | | | | |
| | uuurooo, ony, enno, <u>-</u> , | | | |
| | | | | |
| San Diego | o, CA 92101 | | | |
| Principal occupation / Job title | (See Instructions) | Employer (See Instructions | s) | |
| Conductor | | Historic Tours of Americ | са | |
| Date Full name o | of contributor 🔲 out-of-state PAC (| (ID#:) | Amount of Contribution (\$) | |
| 06/29/2025 Alread, Mi | chael | | | \$100.00 |
| Contributor | address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| Selah, WA | v 98942 | | | |
| Principal occupation / Job title | (See Instructions) | Employer (See Instructions | | |
| Lead Care Coordinator | | Non-Profit Treatment C | enter | |
| | | | | |

| The | e Instru | ction Guide explains how to | complete this fo | orm. | 1 Total pages Schedule A1: Sch: 5/228 Rpt: 8/272 |
|--------|--------------|---------------------------------------|------------------------|--|---|
| 2 FILE | ER NAME | | | | 3 Filer ID (Ethics Commission Filers) |
| | | nes (The Honorable) | | | 00081913 |
| 4 Date | 9 | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/3 | 30/2025 | Amaya, Liselle | | | \$100.00 |
| | | 6 Contributor address; City; State; | Zip Code | | 1 |
| | | | | | |
| | | | | | |
| | | San Antonio, TX 78240 | T | | |
| | | pation / Job title (See Instructions) | | 9 Employer (See Instructions | s) |
| Ana | alyst | | | ArchPoint Group | |
| Date | | | out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/3 | 30/2025 | An, John | | | \$10.00 |
| | | Contributor address; City; State; | | | |
| | | | | | |
| | | | | | |
| Duin | · | Austin, TX 78758 | T | | |
| | • | pation / Job title (See Instructions) | | Employer (See Instructions | , |
| | | ss manager | | North America immigrat | |
| Date | | | out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/2 | 29/2025 | Anders, Terra | | | \$25.00 |
| | | Contributor address; City; State; | | | |
| | | | | | |
| | | Taylor TV 76574 | | | |
| Drin | -inal accu | Taylor, TX 76574 | | Employer (See Instructions | -\ |
| | Employe | pation / Job title (See Instructions) | | Employer (See Instructions Not Employed | S) |
| | | | <u> </u> | | |
| Date | | | out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/2 | 23/2025 | | | | \$50.00 |
| | | Contributor address; City; State; | Zip Code | | |
| | | | | | |
| | | Austin, TX 78723 | | | |
| Prin | cinal occu | pation / Job title (See Instructions) | | Employer (See Instructions | د) |
| | • | omeownership | | Austin Habitat for Huma | |
| | | · · · · · · · · · · · · · · · · · · · | | | |
| Date | e 26/2025 | Anderson*, Jeanne | out-of-state PAC (ID#: |) | Amount of Contribution (\$) \$100.00 |
| 00,2 | 2012025 | Contributor address; City; State; | 7:= Codo | | φ100.00 |
| | | Contributor address, City, State, | ZIP Code | | |
| | | | | | |
| | | Austin, TX 78759 | | | |
| Prin | cipal occu | pation / Job title (See Instructions) | | Employer (See Instructions | s) |
| | Employe | | | Not Employed | -, |
| | | - | 1 | | |
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| The Instruc | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 6/228 Rpt: 9/272 | |
|--------------|---|------------------------------|---|----------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission F | -ilers) |
| | nes (The Honorable) | | 00081913 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) | |
| 06/30/2025 | Andrade, Suzanne | | | \$25.00 |
| | 6 Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | The Colony, TX 75056 | | | |
| | pation / Job title (See Instructions) | 9 Employer (See Instructions | \$) | |
| Realtor | | Self | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/30/2025 | Andree, Kelly | | | \$50.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | The Woodlands, TX 77382 | | | |
| | pation / Job title (See Instructions) | Employer (See Instructions | 3) | |
| Sr manager | | Diligent Corporation | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/30/2025 | Andrews, Kay | | | \$25.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Austin, TX 78746 | | | |
| • | pation / Job title (See Instructions) | Employer (See Instructions | \$) | |
| Not Employe | .d | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/26/2025 | Apodaca, Aliana | | | \$100.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| - · · · | El Paso, TX 79902 | <u> </u> | | |
| • | pation / Job title (See Instructions) | Employer (See Instructions | s) | |
| Consultant | | Positive Directions Co | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/26/2025 | Armstrong, Ray | | | \$25.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Tallahassee, FL 32309 | | | |
| | pation / Job title (See Instructions) | Employer (See Instructions | ;) | |
| Psychologist | | Self | | |
| | | | | |
| | | | | |

| Tł | he Instru | ction Guide explains how | v to complete this f | iorm. | 1 | Total pages Schedule A1: Sch: 7/228 Rpt: 10/272 | |
|-------------|------------------|---------------------------------------|----------------------------|------------------------------|--------------|--|---------|
| 2 FII | ILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | mes (The Honorable) | | | | 00081913 | 1 |
| 4 Da | ate | 5 Full name of contributor | out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| 06 | 6/29/2025 | Arnold, Ann L | | | | | \$50.00 |
| | 1 | 6 Contributor address; City; St | itate; Zip Code | | 1 | | |
| | | | | | | | |
| | | Wimberley, TX 78676 | | | | | |
| Q Dri | rincipal occu | upation / Job title (See Instructions | <u></u> | 9 Employer (See Instructions | | | |
| | lot Employe | | ·) | Not Employed | <i>>)</i> | | |
| Da | ate | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) | |
| 06 | 6/23/2025 | Aron, Daniel | | | | | \$5.00 |
| | I | Contributor address; City; St | | | 1 | | |
| | | | | | | | |
| | | | | | | | |
| | | Austin, TX 78748 | | | | | |
| Pri | rincipal occu | upation / Job title (See Instructions | 3) | Employer (See Instructions | <u> </u> | | |
| | dvertising | | | No Soap Productions | | | |
| Da | ate | Full name of contributor | |) | Τ | Amount of Contribution (\$) | |
| | ale 6/26/2025 | Aron, Daniel | | / | | | \$5.00 |
| | JI 201 202- | Contributor address; City; St | tate: 7in Code | | - | | Ψ0.0- |
| | | | ale, zip coue | | | | |
| | | | | | | | |
| | | Austin, TX 78748 | | | | | |
| Pri | rincipal occu | pation / Job title (See Instructions | <u></u> | Employer (See Instructions | L s) | | |
| | dvertising | puncti ett (| , | No Soap Productions | -, | | |
| | ate | Full name of contributor | | | | Amount of Contribution (\$) | |
| | 6/28/2025 | Aron, Daniel | OUT-OT-State PAC (ID# |) | | | \$5.00 |
| 00 |)/20/2025 | | | | | | ΦΟ.00 |
| | | Contributor address; City; St | ate; Zip Code | | | | |
| | | | | | | | |
| | | Austin, TX 78748 | | | | | |
| Pri | rincipal occu | upation / Job title (See Instructions | 3) | Employer (See Instructions | <u> </u> | | |
| Ac | dvertising | | | No Soap Productions | | | |
| Da | ate | Full name of contributor | out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 6/30/2025 | Ashbrook, Laura | | | | | \$10.00 |
| | | Contributor address; City; St | tate [.] 7in Code | | - | | |
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| | | Mount Prospect, IL 60056 | 3 | | | | |
| Pri | rincinal occu | upation / Job title (See Instructions | | Employer (See Instructions | <u>ال</u> | | |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 8/228 Rpt: 11/272 | |
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| 2 | FILER NAME | | | 3 Filer ID (Ethics Commission File | ers) |
| - | Talarico, Jar | nes (The Honorable) | | 00081913 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) | |
| | 06/30/2025 | Ausley, Robbie | | \$2 | 250.00 |
| | | 6 Contributor address; City; State; Zip Code | | | |
| | | | | | |
| | | | | | |
| | | Austin, TX 78731 | | | |
| | | pation / Job title (See Instructions) | 9 Employer (See Instructions | 3) | |
| | Not Employe | 20 | Not Employed | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| (| 06/29/2025 | Austin, Andrei | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | |
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| | | Missouri City, TX 77459 | i | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 3) | |
| | Not Employe | 20 | Not Employed | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| (| 06/25/2025 | Austin, Andrei | | 5 | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | |
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| | <u></u> | Missouri City, TX 77459 | | \ | |
| | • | pation / Job title (See Instructions) | Employer (See Instructions | 5) | |
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| | Date | |) | Amount of Contribution (\$) | |
| | 06/26/2025 | Avery, Cliff | | \$2 | 250.00 |
| | | Contributor address; City; State; Zip Code | | | |
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| | | Dflugonillo TX 79601 | | | |
| <u> </u> | Dringing ogg | Pflugerville, TX 78691 pation / Job title (See Instructions) | Employer (See Instructions | | |
| | Not Employe | | Not Employed | >) | |
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| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | 050.00 |
| | 06/29/2025 | Avery, Cliff | | ۵. ۲ | 250.00 |
| | | Contributor address; City; State; Zip Code | | | |
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| | | Pflugerville, TX 78691 | | | |
| <u> </u> | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |)) | |
| | Not Employe | | Not Employed | <i>)</i> / | |
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| | The Instru | ction Guide explains how to complete th | lis form. | 1 | Total pages Schedule A1: Sch: 9/228 Rpt: 12/272 | |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | ו Filers) |
| | Talarico, Jar | nes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (I | (ID#:) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Avila, Gilbert | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | " | | |
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| | | | | | | |
| _ | | Austin, TX 78748 | | Ĺ | | |
| 8 | | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Teacher | | Austin ISD | | | |
| | Date | | (ID#:) | | Amount of Contribution (\$) | |
| | 06/26/2025 | Babers, Bette | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Montromeny TX 77356 | | | | |
| | Principal occu | Montgomery, TX 77356 Ipation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Not Employe | | Not Employed | 5) | | |
| | | | | — | Amount of Contribution (\$) | |
| | Date 06/26/2025 | Full name of contributor out-of-state PAC (I Baggs, Bo | ID#:) | | Amount of Contribution (\$) | \$25.00 |
| | 00/20/2025 | | | | | φ23.00 |
| | | Contributor address; City; State; Zip Code | | | | |
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| | | Port Arthur, TX 77642 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | us) | | |
| | Constr Mgm | t Consultant | Cheniere Energy | | | |
| | Date | Full name of contributor out-of-state PAC (I | (ID#:) | Т | Amount of Contribution (\$) | |
| | 06/30/2025 | Baggs, Bo | | | | \$25.00 |
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| | | Port Arthur, TX 77642 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Constr Mgm | t Consultant | Cheniere Energy | | | |
| | Date | Full name of contributor Out-of-state PAC (I |) | Т | Amount of Contribution (\$) | |
| | 06/30/2025 | Bailey, Deborah | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | Ϊ | | |
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| | | Cedar Creek, TX 78612 | | Ť | | |
| | | ipation / Job title (See Instructions) | Employer (See Instructions | S) | | |
| | Not Employe | ;d | Not Employed | | | |
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| | The Instru | ction Guide explains how to complete | this fo | rm. | 1 | Total pages Schedule A1: Sch: 10/228 Rpt: 13/272 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| [| | mes (The Honorable) | | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PA | AC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/29/2025 | Bailey, Heather | | | | | \$200.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | | |
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| Ļ | Dringinal agai | Austin, TX 78703 | | Employer (Coo Instructions | <u> </u> | | |
| ð | consultant | ipation / Job title (See Instructions) | 19 | Employer (See Instructions Self | 5) | | |
| \vdash | | | | | | | |
| | Date | I — | AC (ID#: |) | | Amount of Contribution (\$) | ÷05.00 |
| | 06/25/2025 | | | | | | \$25.00 |
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| | | Austin, TX 78751 | | | | | |
| ┝ | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> 5) | | |
| | indexer | | | American Geosciences | | titute | |
| ⊨ | Date | Full name of contributor out-of-state PA | ▲C. (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Baker, Mary | 10 (ID | | | | \$100.00 |
| | • • • • • | Contributor address; City; State; Zip Code | | | | | + - · · |
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| | | | | | | | |
| | | Austin, TX 78726 | | | | | |
| Γ | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Not Employe | ;d | | Not Employed | | | |
| | Date | Full name of contributor Dut-of-state PA | AC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/23/2025 | Baker, Shawn | | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | 1 | | |
| | | | | | | | |
| | | Denten TV 76200 | | | | | |
| ┝ | Drincinal occu | Denton, TX 76209 Ipation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | Audio produ | | | Shawn Baker | 5) | | |
| ╞ | | | <u> </u> | Shawn Baker | 1 | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PA Ballew, Kristin | AC (ID#: |) | | Amount of Contribution (\$) | \$25.00 |
| | 00/30/2023 | Contributor address; City; State; Zip Code | | | | | Φ20.00 |
| | | Continuator address, City, State, Zip Code | | | | | |
| | | | | | | | |
| | | Selah, WA 98942 | | | | | |
| \vdash | Principal occu | I Ipation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Teacher | | | Selah School district | | | |
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| Image: The Instruction Guide explains how to complete this form. Sch: 1 Image: Sch: 1 Sch: 1 Sch: 1 Sch: 1 Image: Sch: 1 Sch: 1 | ages Schedule A1: .1/228 Rpt: 14/272 (Ethics Commission Filers) .913 at of Contribution (\$) \$50.00 tof Contribution (\$) \$25.00 |
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| Talarico, Jawes (The Honorable) 00081 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount 06/30/2025 Barberena, Miriam 6 Contributor address; City; State; Zip Code 7 Amount 6 Contributor address; City; State; Zip Code 9 Employer (See Instructions) 9 7 Date Full name of contributor out-of-state PAC (ID#:) Amount 06/30/2025 Barnes, Valerie 9 Employer (See Instructions) 9 06/30/2025 Barnes, Valerie Out-of-state PAC (ID#:) Amount 06/30/2025 Barnes, Valerie Contributor address; City; State; Zip Code Amount 8 Kyle, TX 78640 Kyle, TX 78640 Kyle, TX 78640 Kyle, TX 78640 | 913 at of Contribution (\$) \$50.00 |
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| 06/30/2025 Barberena, Miriam 6 Contributor address; City; State; Zip Code Austin, TX 78728 Austin, TX 78728 8 Principal occupation / Job title (See Instructions) Data Governance Analyst 9 Employer (See Instructions) Emerson T&M Date Full name of contributor out-of-state PAC (ID#:) Amoun 06/30/2025 Barnes, Valerie Contributor address; City; State; Zip Code | \$50.00 |
| 6 Contributor address; City; State; Zip Code Austin, TX 78728 Austin, TX 78728 8 Principal occupation / Job title (See Instructions) Data Governance Analyst 9 Employer (See Instructions) Emerson T&M Date Full name of contributor out-of-state PAC (ID#:) Amoun 06/30/2025 Barnes, Valerie | t of Contribution (\$) |
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| Austin, TX 78728 8 Principal occupation / Job title (See Instructions) Data Governance Analyst 9 Employer (See Instructions) Emerson T&M Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Barnes, Valerie Amount Contributor address; City; State; Zip Code Kyle, TX 78640 | |
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| 06/30/2025 Barnes, Valerie Contributor address; City; State; Zip Code Kyle, TX 78640 | |
| 06/30/2025 Barnes, Valerie Contributor address; City; State; Zip Code Kyle, TX 78640 | |
| Contributor address; City; State; Zip Code Kyle, TX 78640 | Ψ20.00 |
| Kyle, TX 78640 | |
| | |
| Principal occupation / Job title (See Instructions) | |
| | |
| Researcher Texas state university | |
| Date Full name of contributor out-of-state PAC (ID#:) Amoun | t of Contribution (\$) |
| 06/30/2025 Barnum, Sue | \$25.00 |
| Contributor address; City; State; Zip Code | |
| San Antonio, TX 78209 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| psychotherapist self | |
| Date Full name of contributor out-of-state PAC (ID#:) Amoun | t of Contribution (\$) |
| 06/29/2025 Barr, Linda | \$10.00 |
| Contributor address; City; State; Zip Code | |
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| Manchaca, TX 78652 | |
| Manchaca, TX 78652 Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
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| Principal occupation / Job title (See Instructions) Employer (See Instructions) Librarian Austin community college | nt of Contribution (\$) |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) Librarian Austin community college Date Full name of contributor out-of-state PAC (ID#:) | nt of Contribution (\$) |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) Librarian Austin community college Date Full name of contributor out-of-state PAC (ID#:) 06/25/2025 Barron, Diana Amoun | nt of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) Librarian Austin community college Date Full name of contributor out-of-state PAC (ID#:) Amoun 06/25/2025 Barron, Diana Amoun | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) Librarian Austin community college Date Full name of contributor out-of-state PAC (ID#:) 06/25/2025 Barron, Diana | |
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| Principal occupation / Job title (See Instructions) Employer (See Instructions) Librarian Austin community college Date Full name of contributor out-of-state PAC (ID#:) 06/25/2025 Barron, Diana Contributor address; City; State; Zip Code Austin, TX 78750 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) Librarian Austin community college Date Full name of contributor out-of-state PAC (ID#:) 06/25/2025 Barron, Diana Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code | |

| The Instruc | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 12/228 Rpt: 15/272 | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission F | -ilers) |
| | nes (The Honorable) | | 00081913 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) | |
| 06/30/2025 | Barton, Carol | | | \$25.00 |
| | 6 Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | San Antonio, TX 78247 | | | |
| | ipation / Job title (See Instructions) | 9 Employer (See Instructions | ;) | |
| Not Employe | ;d | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/30/2025 | Baskin, Bonnie | | \$1 | L,000.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Johnson City, TX 78636 | | | |
| | pation / Job title (See Instructions) | Employer (See Instructions | | |
| Not Employe | ;d | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/23/2025 | Batdorf, Joseph | | \$1 | L,000.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Houston, TX 77077 | | | |
| | pation / Job title (See Instructions) | Employer (See Instructions | ;) | |
| President | <u></u> | J Turner Research | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/30/2025 | Baustian, Pam | | | \$50.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Richardson, TX 75080 | | | |
| | pation / Job title (See Instructions) | Employer (See Instructions |) | |
| retired | | none | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/30/2025 | Beal, Louisa | | | \$50.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
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| | Fircrest, WA 98466 | | | |
| | ipation / Job title (See Instructions) | Employer (See Instructions | ;) | |
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| | The Instru | ction Guide explains how to cor | nplete this fo | orm. | 1 | Total pages Schedule A1: Sch: 13/228 Rpt: 16/272 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | Talarico, Jar | nes (The Honorable) | | | | 00081913 | , |
| 4 | Date | 5 Full name of contributor out-o | f-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/25/2025 | Beal, Louisa | | | | | \$50.00 |
| | | 6 Contributor address; City; State; Zip C | | | | | |
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| | | Fircrest, WA 98466 | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instructions |) | | |
| ľ | Not Employe | | | Not Employed | , | | |
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| | Date | _ | f-state PAC (ID#: |) | | Amount of Contribution (\$) | ¢10.00 |
| | 06/26/2025 | | | | | | \$10.00 |
| | Contributor address; City; State; Zip Code | | | | | | |
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| | | Cricoward TV 70000 | | | | | |
| | <u> </u> | Spicewood, TX 78669 | | | | | |
| | • | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Not Employe | | | Not Employed | | | |
| | Date | _ | f-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/28/2025 | Beaulieu, Jeffrey | | | | | \$50.00 |
| | | Contributor address; City; State; Zip C | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Georgetown, TX 78628 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Not Employe | ed | | Not Employed | | | |
| | Date | Full name of contributor | f-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/23/2025 | Beaver, Becky | | | | | \$250.00 |
| | | Contributor address; City; State; Zip C | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Austin, TX 78701 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Family Law | Attorney | | Self | | | |
| F | Date | Full name of contributor 🛛 out-o | f-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Beck, Joyce L. | | | | | \$10.00 |
| | | Contributor address; City; State; Zip C | Code | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Fort Worth, TX 76123 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Instructor | | | TCU Extended Educatio | n | | |
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| - | The Instru | ction Guide explains how | v to complete this f | orm. | | 1 | Total pages Schedule A1: Sch: 14/228 Rpt: 17/272 | |
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| 2 | FILER NAME | | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | | mes (The Honorable) | | | | - | 00081913 | |
| 4 [| Date | 5 Full name of contributor | out-of-state PAC (ID#: | |) | 7 | Amount of Contribution (\$) | |
| (| 06/29/2025 | Beckwith, Jane | | | | | | \$10.00 |
| | I | 6 Contributor address; City; S | State; Zip Code | | | | | |
| | | Randolph, ME 04346 | | | | | | |
| 8 1 | Principal occu | upation / Job title (See Instructions | s) | 9 Employer (Se | e Instructions |) | | |
| - | Tutor | | 1 | Self | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: | <u> </u> |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Behrmann, Lauren | | | / | | Allount of Contribution (4) | \$100.00 |
| Ì | 1013012023 | | | | | | | Φ100.00 |
| | Contributor address; City; State; Zip Code | | | | | | | |
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| | | 1 | | | | | | |
| | I | Grapevine, TX 76051 | | | | | | |
| | | upation / Job title (See Instructions | S) | Employer (Se | ee Instructions) |) | | |
| - | Technical Br | rewing Manager | 1 | Mark Anthor | ny Brewing | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: | |) | | Amount of Contribution (\$) | |
| | 06/23/2025 | Bell, Caroline | | | | | | \$100.00 |
| | 50,20,21 | · · · | State: Zin Code | | | | | ¥±v |
| | | | late, Lip Coue | | | | | |
| | | 1 | | | | | | |
| | | Fort Worth, TX 76123 | | | | | | |
| | | | | | | <u> </u> | | |
| | | upation / Job title (See Instructions | 3) | | ee Instructions) |) | | |
| | Not Employe | ,d | | Not Employe | ea | | | |
| [| Date | Full name of contributor | out-of-state PAC (ID#: | |) | | Amount of Contribution (\$) | |
| (| 06/30/2025 | Bell, Kathy | | | | | | \$25.00 |
| | I | Contributor address; City; S | State; Zip Code | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | Odessa, TX 79762 | | | | | | |
| | Principal occu | upation / Job title (See Instructions | .s) | Employer (Se | e Instructions) |) | | |
| | Realtor | | · · · · · · · · · · · · · · · · · · · | Self | | | | |
| F, | Date | Full name of contributor | | <u></u> | | | Amount of Contribution (\$) | |
| | 06/30/2025 | | out-of-state PAC (ID#: | | | | | \$100.00 |
| | 1012012023 | | | | | | | ΦT00.00 |
| | | Contributor address; City; S | tate; Zip Code | | | | | |
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| | | | | | | | | |
| | | Dallas, TX 75220 | | | | | | |
| F | Principal occu | upation / Job title (See Instructions | s) | Employer (Se | ee Instructions) |) | | |
| | Attorney | | , | Winstead PC | С | | | |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 15/228 Rpt: 18/272 | |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | mes (The Honorable) | | - | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/23/2025 | Bellamy, Brad | | | | \$50.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Austin, TX 78728 | | | | |
| 8 | Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| | | ager/Engineer | Self-Employed | , | | |
| ⊨ | Date | |) | | Amount of Contribution (\$) | |
| | 06/24/2025 | Bencken, Jeremy | | | Allount of Contribution (\$) | \$50.00 |
| | 00/2 1/2022 | | | | | Ψ00.00 |
| | Contributor address, City, State, Zip Code | | | | | |
| | | | | | | |
| | | Austin, TX 78703 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Analytics & [| Data | Alamo Drafthouse | | | |
| ╞ | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Bendall, Samuel | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Austin, TX 78748 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Marketing Di | | Ducati Austin | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Benitez, Beatriz | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Mcallen, TX 78504 | | | | |
| ┝ | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u>ן</u> | | |
| | Sales Repre | | Abbvie |) | | |
| ╞ | Date | | | | Amount of Contribution (\$) | |
| | Dale 06/23/2025 | Full name of contributor out-of-state PAC (ID#: Berasley, Ann |) | | Amount of Contribution (\$) | \$25.00 |
| | 0012012020 | Contributor address; City; State; Zip Code | | | | Ψ20.00 |
| | | Continuation address, City, State, Lip Code | | | | |
| | | | | | | |
| | | Austin, TX 78758 | | | | |
| ┢ | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Continuity pl | anner | Texas Medical Board | | | |
| | | | | | | |
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| | The Instru | ction Guide explains how to complete this | s form. | 1 | Total pages Schedule A1: Sch: 16/228 Rpt: 19/272 | |
|----------|--|---|------------------------------|--------------|---|-----------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | | nes (The Honorable) | | | 00081913 | , |
| 4 | Date | 5 Full name of contributor Out-of-state PAC (ID# | #:) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Berridge, Dana | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | " | | |
| | | | | | | |
| | | Houston, TX 77008 | | | | |
| | Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | <u>ا</u> | | |
| ľ | Not Employe | | Not Employed | 5) | | |
| ╞ | | | | T | Amount of Contribution (\$) | |
| | Date 06/23/2025 | Berry, Rebecca | #:) | | Amount of Contribution (\$) | \$25.00 |
| | 0012312023 | | | | | Φ20.00 |
| | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | |
| | | Stephenville, TX 76401 | | | | |
| \vdash | Principal occu | I | Employer (See Instructions | <u> </u> | | |
| | Not Employe | | Not Employed | - | | |
| ╞ | Date | Full name of contributor out-of-state PAC (ID# | | Ι | Amount of Contribution (\$) | |
| | 06/26/2025 Bertoni, Rebecca | | | | \$100.00 | |
| | | Contributor address; City; State; Zip Code | | · | | |
| | | | | | | |
| | | | | | | |
| | | Argyle, TX 76226 | | | | |
| | | ipation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | ;d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID# | #:) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Billnitzer, Beth | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Can Antonia TV 70222 | | | | |
| \vdash | Drincinal occu | San Antonio, TX 78232 Ipation / Job title (See Instructions) | Employer (See Instructions | | | |
| | Teacher | | TMI-Episcopal School | 5) | | |
| ┝ | | | | . | | |
| | Date 06/23/2025 | Full name of contributor Out-of-state PAC (ID# Blackson, Steve | #:) | | Amount of Contribution (\$) | \$100.00 |
| | 0012312023 | | | | | Φ100.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Austin, TX 78750 | | | | |
| ⊢ | Principal occu | I Ipation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Landscape [| | Windy Point Garden Ra | | ads | |
| | | | | | | |
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| | The Instru | ction Guide explains how to comp | olete this fo | orm. | 1 | Total pages Schedule A1: Sch: 17/228 Rpt: 20/272 | |
|---|--|---|----------------|------------------------------|----------------|---|-----------------|
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | | mes (The Honorable) | | | | 00081913 | , |
| 4 | Date | | tate PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/25/2025 | Blackwell, Lisa | | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Cod | | | 1 | | |
| | | | | | | | |
| | | Benbrook, TX 76126 | | | | | |
| 8 | Principal occu | Ipation / Job title (See Instructions) | | 9 Employer (See Instructions | <u> </u> 5) | | |
| - | Optician | , , , , , , , , , , , , , , , , , , , | | Costco | '' | | |
| ⊨ | Date | Full name of contributor Out-of-sta | |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Blackwell, Meryati | ומופ ראס (ושיי | | | Allount of Contribution (4) | \$100.00 |
| | 00,00,2020 | | | | | | 4100.0 0 |
| | Contributor address, City, State, Zip Code | | | | | | |
| | | | | | | | |
| | | Fayetteville, AR 72701 | | | | | |
| ⊢ | Principal occu | I pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> 5) | | |
| | Not Employe | , , | | Not Employed | | | |
| ╞ | Date | Full name of contributor Out-of-sta | tate PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Blair, Ryan | | | Allount of Contineation (+) | \$1.51 | | |
| | 00,00,2:2: | Contributor address; City; State; Zip Cod | | | | | +- · |
| | | | ue | | | | |
| | | | | | | | |
| | | Rainbow, TX 76077 | | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Not Employe |)d | | Not Employed | | | |
| ╞ | Date | Full name of contributor out-of-sta | tate PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Blanton, Teresa `` | | | | | \$100.00 |
| | | Contributor address; City; State; Zip Cod | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Cedar Park, TX 78613 | | | | | |
| | Principal occu | ipation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Not Employe | ed | | Not Employed | | | |
| F | Date | Full name of contributor out-of-sta | tate PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/23/2025 | Blazer, Emily | | | | | \$50.00 |
| | | Contributor address; City; State; Zip Cod | de | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Austin, TX 78757 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | | | |
| | retired syste | ms analyst | | Teacher Retirement Sys | stei | m | |
| | | | | | | | |

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|----------|----------------|--|--|--------------|---|-----------|
| | The Instru | ction Guide explains how to complete this | s form. | 1 | Total pages Schedule A1: Sch: 18/228 Rpt: 21/272 | |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | ו Filers) |
| | Talarico, Jar | mes (The Honorable) | | | 00081913 | - |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID; |)#:) | 7 | Amount of Contribution (\$) | |
| | 06/28/2025 | Bleakley, Tracey | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | ļ | | | |
| | | | 1 | | | |
| | | Georgetown, TX 78628 | | | | |
| 8 | Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | 3) | | |
| | Teacher | | Leander ISD | | | |
| F | Date | Full name of contributor out-of-state PAC (ID; |)#:) | Γ | Amount of Contribution (\$) | |
| | 06/26/2025 | Blessinger, Yady | | | | \$50.00 |
| | | | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Sugar Land, TX 77479 | ļ | | | |
| ⊢ | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Educator | | FBISD | | | |
| ⊨ | Date | Full name of contributor Out-of-state PAC (ID; | , , , | Γ | Amount of Contribution (\$) | |
| | 06/28/2025 | Blomstrom, Karen | r/ | | Allount of Contingation (+) | \$100.00 |
| | 00/20/2022 | | | • | | Ψ100.00 |
| | | Contributor address; City; State; Zip Code | 1 | | | |
| | | | | | | |
| | | Somerville, TX 77879 | ļ | | | |
| \vdash | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Attorney | | Karen A Blomstrom | , | | |
| ╞ | | Full name of contributor Out-of-state PAC (ID) | | | Amount of Contribution (\$) | |
| | Date | |)#:) | | Amount of Contribution (\$) | ቀንፍ በበ |
| | 06/30/2025 | Blueford, Pia | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | 1 | | | |
| | | | | | | |
| | | Sacramento, CA 95834 | ļ | | | |
| \vdash | Dringingl occu | | Employer (See Instructions | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions) State of CA | 3) | | |
| | Analysts | | | — | | |
| | Date | Full name of contributor out-of-state PAC (ID) | #:) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Boggess, John | ! |] | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | 1 | | | |
| | | Bedford, VA 24523 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | 3) | | |
| | Realtor | | Comey & Shepherd | | | |
| | | | | | | |
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| The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 19/228 Rpt: 22/272 | |
|------------------|--|------------------------------|---|----------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission | Filers) |
| | nes (The Honorable) | | 00081913 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) | |
| 06/29/2025 | Bond-Upson, Leland | | | \$5.00 |
| | 6 Contributor address; City; State; Zip Code | | | |
| | Fremont, CA 94536 | | | |
| 8 Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | |
| Not Employe | ed | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 06/29/2025 | Bond-Upson, Leland | / | | \$5.00 |
| | | | | |
| | | | | |
| | Fremont, CA 94536 | | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | |
| Not Employe | | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/26/2025 | Boodakian, Dave |) | Amount of Contribution (\$) | \$50.00 |
| 00/20/2025 | | | | φ30.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Demosti CA 02002 | | | |
| | Bonsall, CA 92003 | | - | |
| - | pation / Job title (See Instructions) | Employer (See Instructions | 5) | |
| Musician | | Self | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/29/2025 | Booze, Valerie | | | \$3.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Wilmington, NC 28409 | | | |
| - | pation / Job title (See Instructions) | Employer (See Instructions | 5) | |
| Not Employe | ed | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/25/2025 | Bopp, Genie | | | \$100.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Houston, TX 77059 | | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | |
| retired | | n/a | | |
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| The Instru | uction Guide explains how to complete this f | form. | 1 Total pages Schedule A1: Sch: 20/228 Rpt: 23/272 |
|--------------------|---|------------------------------|---|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Ja | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/28/2025 | Borden-Neary, Gregory | | \$12.50 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | Plano, TX 75024 | | |
| 8 Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | \$) |
| Not Employ | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/27/2025 | Borger, Sean | | \$250.00 |
| | Contributor address; City; State; Zip Code | | • |
| | | | |
| | | | |
| | Austin, TX 78739 | | |
| Principal occi | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) |
| CRE | · · · · · · · · · · · · · · · · · · · | Self | ·/ |
| Date | Full name of contributor out-of-state PAC (ID#: | | Amount of Contribution (\$) |
| 06/30/2025 | | / | \$50.00 |
| 00/30/2023 | | | |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Manor, TX 78653 | | |
| Princinal occi | upation / Job title (See Instructions) | Employer (See Instructions | <u></u> |
| Marketing | | Unanet | <i>"</i> |
| | Full name of contributor Out-of-state PAC (ID#: | | Amount of Contribution (\$) |
| Date 06/29/2025 | |) | Amount of Contribution (\$) \$25.00 |
| 00/29/2025 | Bose, Marjorie | | φ20.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Argyle, TX 76226 | | |
| Princinal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u></u> |
| Not Employ | | Not Employed | <i>"</i> |
| | | | Amount of Contribution (\$) |
| Date | |) | Amount of Contribution (\$) \$10.00 |
| 06/30/2025 | | | φτυ.υυ |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Waco, TX 76711 | | |
| Dringing ogg | | | - \ |
| | upation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Not Employ | | Not Employed | |
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| | The Instru | ction Guide explains how to complete this f | orm. | | Total pages Schedule A1: Sch: 21/228 Rpt: 24/272 | |
|---|--|---|--|-----------------|---|----------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Talarico, Jar | mes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/26/2025 | Bowen, Debbie | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Abilene, TX 79605 | | | | |
| 8 | Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | <u>ا</u> | | |
| | self employe | | self | " | | |
| - | Date | Full name of contributor out-of-state PAC (ID#: | | — | Amount of Contribution (\$) | |
| | 06/30/2025 | Bowie, Darrell |) | | | \$5.00 |
| | 00/00/2020 | | | { | | Ψ0.00 |
| | Contributor address, City, State, Zip Code | | | | | |
| | | | | | | |
| | | Mansfield, TX 76063 | | | | |
| | Principal occu | I upation / Job title (See Instructions) | Employer (See Instructions | 1 3) | | |
| | Instructional | | Fort Worth ISD | | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ |) | Π | Amount of Contribution (\$) | |
| | 06/30/2025 | Brady, Ellen | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Dallas, TX 75225 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | 3) | | |
| | Not Employe | ed | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/26/2025 | Brady, Michael | | | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | Dringing oog | Austin, TX 78702 | Employer (Cool Instructions | <u> </u> | | |
| | Teacher/ Art | upation / Job title (See Instructions) tist | Employer (See Instructions private | 3) | | |
| | | | <u> </u> | — | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | <u> </u> |
| | 06/30/2025 | Branagh, Elaine | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Austin, TX 78750 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u>ار</u> ج) | | |
| | Not Employe | | Not Employed | , | | |
| | | <u> </u> | ······································ | | | |
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| Tŀ | ne Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 22/228 Rpt: 25/272 | |
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| 2 FIL | LER NAME | | | 3 | Filer ID (Ethics Commission | ו Filers) |
| Та | alarico, Jan | nes (The Honorable) | | | 00081913 | |
| 4 Da | ate | 5 Full name of contributor out-of-state PAC (ID# | #:) | 7 | Amount of Contribution (\$) | |
| 06 | 6/30/2025 | Braunagel-Brown, Mary | | | | \$100.00 |
| | | 6 Contributor address; City; State; Zip Code | | " | | |
| | | | | | | |
| | | Austin, TX 78736 | | | | |
| | | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| No | ot employe | d | Not employed | | | |
| Da | ate | Full name of contributor out-of-state PAC (ID# | #:) | T | Amount of Contribution (\$) | |
| 06 | 6/30/2025 | Brazeau, Tina | | | | \$25.00 |
| | Contributor address; City; State; Zip Code | | " | | | |
| | | | | | | |
| | | | | | | |
| | | Talent, OR 97540 | - i | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| Re | etired | | Retired | | | |
| Da | ate | Full name of contributor 🛛 out-of-state PAC (ID# | #:) | Τ | Amount of Contribution (\$) | |
| 06 | 06/30/2025 Brewster, Ashley | | | | | \$25.00 |
| Contributor address; City; State; Zip Code | | | 1 | | | |
| | | | | | | |
| | Friendswood TX 77546 | | | | | |
| | · · · | Friendswood, TX 77546 | | Ĺ | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | | | |
| | Counselor Legacy community heal | | lth | | | |
| Da | | Full name of contributor out-of-state PAC (ID# | ;) | | Amount of Contribution (\$) | _ |
| 06 | 6/30/2025 | Brewton, Donna | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Mountain Lamo TV 70050 | | | | |
| Dri | | Mountain Home, TX 78058 | Employer (See Instruction | <u> </u> | | |
| | incipal occu ot Employe | pation / Job title (See Instructions) | Employer (See Instructions Not Employed | S) | | |
| | | | | T | | |
| Da | | Full name of contributor out-of-state PAC (ID# | #:) | | Amount of Contribution (\$) | * 25 00 |
| 06 | 6/25/2025 | Brewton, Donna | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Mountain Home, TX 78058 | | | | |
| Pri | incinal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | ot Employe | | Not Employed | Sj | | |
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| The Instru | ction Guide explains how to complete this | form. | 1 Total pages Schedule A1: Sch: 23/228 Rpt: 26/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: | t) | 7 Amount of Contribution (\$) |
| 06/29/2025 | Brown, Emily | | \$10.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| | Dallas, TX 75205 | | |
| | upation / Job title (See Instructions) | 9 Employer (See Instructions | 3) |
| Writer | | Self | |
| Date | Full name of contributor out-of-state PAC (ID#: | :) | Amount of Contribution (\$) |
| 06/29/2025 | Brown, George | | \$100.00 |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| | Austin, TX 78727 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | \$) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: | t:) | Amount of Contribution (\$) |
| 06/30/2025 Browne, Joanna Contributor address; City; State; Zip Code | | | \$50.00 |
| | | | • |
| | | | |
| | | | |
| | Dallas, TX 75238 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | \$) |
| Account mai | nagement | Prodege | |
| Date | Full name of contributor out-of-state PAC (ID#: | ·) | Amount of Contribution (\$) |
| 06/25/2025 | Browner, Arthur | | \$100.00 |
| | Contributor address; City; State; Zip Code | | • |
| | | | |
| | | | |
| | Georgetown, TX 78633 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: | :) | Amount of Contribution (\$) |
| 06/27/2025 | Browner, Arthur | | \$100.00 |
| | Contributor address; City; State; Zip Code | , | 1 |
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| | | | |
| | Georgetown, TX 78633 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| Not Employe | ed | Not Employed | |
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| | The Instru | ction Guide explains how t | o complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 24/228 Rpt: 27/272 | |
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| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commissio | on Filers) |
| | | nes (The Honorable) | | | | 00081913 | |
| 4 | Date | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/29/2025 | Browner, Arthur | | | | | \$100.00 |
| | | 6 Contributor address; City; State | e; Zip Code | | 1 | | |
| | | | | | | | |
| | | Georgetown, TX 78633 | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instructions | 5) | | |
| | Not Employe | | | Not Employed | , | | |
| ╞ | Date | Full name of contributor | I |) | | Amount of Contribution (\$) | |
| | 06/29/2025 Browner, Arthur Contributor address; City; State; Zip Code | | | Allount of Continuation (+) | \$100.00 | | |
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| | | Georgetown, TX 78633 | | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Not Employe | ed . | | Not Employed | | | |
| ⊨ | Date Full name of contributor out-of-state PAC (ID#: 06/24/2025 Bruce, Garnett Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | | |
| | | | | | | \$25.00 | |
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| | Austin, TX 78759 | | | | | | |
| | | Employer (See Instructions | 5) | | | | |
| | Teacher University of Texas | | University of Texas | | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/28/2025 | Bruegger, Joe | | | | | \$1,000.00 |
| | | Contributor address; City; State | | | | | |
| | | | | | | | |
| | | Dollag, TX 75267 | | | | | |
| _ | Dringing ogg | Dallas, TX 75367 pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | Lawyer | | | Law Office of Joseph Br | | nner PLLC | |
| ⊨ | 2 | | | | | | |
| | Date 06/24/2025 | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | ¢1 000 00 |
| | 00/24/2025 | | | | | | \$1,000.00 |
| | | Contributor address; City; State | e; Zip Code | | | | |
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| | | Dallas, TX 75367 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u>ا</u> ټ) | | |
| | Lawyer | , | | Law Office of Joseph Br | | gger | |
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| Tł | he Instru | ction Guide explains how to complete this f | orm. | | Total pages Schedule A1: Sch: 25/228 Rpt: 28/272 | |
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| 2 FII | LER NAME | | | | Filer ID (Ethics Commission | Filers) |
| | | nes (The Honorable) | | 1 | 00081913 | , |
| 4 Da | ate | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| 06 | 6/30/2025 | Bryant, Jordan | | | | \$50.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | San Antonio, TX 78217 | | | | |
| 8 Pri | incipal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| Te | eacher | | NEISD | | | |
| Da | ate | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| 06 | 06/30/2025 Buchanan, Lillian Contributor address; City; State; Zip Code | | | | | \$10.00 |
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| | | | | | | |
| | | Austin, TX 78702 | | | | |
| Pri | rincipal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| Ps | sychothera | ,pist | Self | | | |
| Da | ate | Full name of contributor out-of-state PAC (ID#: | <u> </u> | Т | Amount of Contribution (\$) | |
| 06 | 06/28/2025 Buchanan, Lillian Contributor address; City; State; Zip Code | | / | | | \$15.00 |
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| Austin, TX 78702 Principal occupation / Job title (See Instructions) Em | | | | | | |
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| | | Employer (See Instructions | s) | | | |
| | | Self | | | | |
| Date Full name of contributor Out-of-state PAC (ID#: | |) | Τ | Amount of Contribution (\$) | | |
| 06 | 6/27/2025 | Bucher, Matt | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | · | | |
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| | | Austin, TX 78728 | | | | |
| Pri | rincipal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| Ma | larketing M | anager | Charles Schwab | | | |
| Da | ate | Full name of contributor out-of-state PAC (ID#: |) | Т | Amount of Contribution (\$) | |
| 06 | 6/30/2025 | Buckle, Cyndie | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | · | | |
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| | | Lubbock, TX 79416 | | | | |
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| Ur | niversity le | cturer | Texas Tech University | | | |
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| | The Instru | ction Guide explains how to complet | te this for | rm. | 1 | Total pages Schedule A1: Sch: 26/228 Rpt: 29/272 | |
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| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | | mes (The Honorable) | | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state | PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Buente, Julie | | | | | \$50.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | San Antonio, TX 78254 | | | | | |
| 8 | Principal occu Teacher | upation / Job title (See Instructions) | 9 | Employer (See Instructions Northside ISD | ;) | | |
| | Date | Full name of contributor out-of-state | PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Buferd, Richard | | | | | \$100.00 |
| | 00,01.2 | | | | | | Ŧ = |
| | Contributor address, City, State, Zip Code | | | | | | |
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| | | Dallas, TX 75214 | | | | | |
| ┢── | Principal occu | upation / Job title (See Instructions) | | Employer (See Instructions | لــــــــــــــــــــــــــــــــــــ | | |
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| | Date | | PAC (ID#: |) | | Amount of Contribution (\$) | <u>ቀን</u> ር 00 |
| | 06/27/2025 | Bugg, James | | | | | \$25.00 |
| Contributor address; City; State; Zip Code | | | | | | | |
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| | <u> </u> | San Antonio, TX 78230 | | | Ļ | | |
| | | upation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| L | Not Employe | ;d | | Not Employed | | | |
| | Date | Full name of contributor out-of-state I | PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/23/2025 | Bulla, Dale & Pat | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | ••••• | | | | |
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| | | | | | | | |
| | | Austin, TX 78750 | | | | | |
| | | upation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| | Not Employe | ≥d | | Not Employed | | | |
| F | Date | Full name of contributor out-of-state | PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Bullin, Mary | | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | ••••• | | | | |
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| | | | | | | | |
| | | Round Rock, TX 78681 | | | | | |
| ⊢ | Principal occu | upation / Job title (See Instructions) | | Employer (See Instructions | لــــــــــــــــــــــــــــــــــــ | | |
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| The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: Sch: 27/228 Rpt: 30/272 2 FILER NAME Tatarico, James (The Honorable) 3 Filer ID (Ethics Commission Filers) 000/29/2025 3 4 Date 06/29/2025 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (S) \$1,000.00 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Amount of Contribution (S) \$50.00 Date 06/30/2025 Full name of contributor out-of-state PAC (ID#: |
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| Talarico, James (The Honorable) 00081913 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$) \$1,000.00 06/29/2025 6 Contributor address; City; State; Zip Code 7 Amount of Contribution (\$) \$1,000.00 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Amount of Contribution (\$) \$50.00 06/30/2025 Full name of contributor |
| Talarico, James (The Honorable) 00081913 4 Date 06/29/2025 5 Full name of contributor out-of-state PAC (ID#:) Fullock, Dan 7 Amount of Contribution (\$) Fullock, Dan 51,000.00 6 Contributor address; City; State; Zip Code Austin, TX 78763 9 Employer (See Instructions) Not Employed 7 Amount of Contribution (\$) State; Zip Code 06/30/2025 Full name of contributor out-of-state PAC (ID#:) Bumstead, Alison Contributor address; City; State; Zip Code Amount of Contribution (\$) State; Zip Code Amount of Contribution (\$) State; Zip Code State; Zip Code Principal occupation / Job title (See Instructions) Contributor address; City; State; Zip Code Employer (See Instructions) School Amount of Contribution (\$) State; Zip Code Amount of Contribution (\$) State; Zip Code State; Zip Code St |
| 06/29/2025 Bullock, Dan \$1,000.01 6 Contributor address; City; State; Zip Code Austin, TX 78763 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) Contributor address; City; State; Zip Code Amount of Contribution (\$) School Principal occupation / Job title (See Instructions) Contributor address; City; State; Zip Code Employer (See Instructions) School Amount of Contribution (\$) \$50.00 Date Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) School Date Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) School Date Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) St25.00 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) St25.00 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) St00.00 |
| 6 Contributor address; City; State; Zip Code Austin, TX 78763 Principal occupation / Job title (See Instructions) Not Employed 8 Principal occupation / Job title (See Instructions) Not Employed Date Full name of contributor |
| 6 Contributor address; City; State; Zip Code Austin, TX 78763 Principal occupation / Job title (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Amount of Contribution (\$) O6/30/2025 Burnstead, Alison Contributor address; City; State; Zip Code Amount of Contribution (\$) Contributor address; City; State; Zip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Teacher Eugene, OR 97408 Principal occupation / Job title (See Instructions) Employer (See Instructions) Teacher School Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$25.00 O6/27/2025 Burton, Evelyn Amount of Contribution (\$) O6/27/2026 Pflugerville, TX 78660 Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) \$25.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$25.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) < |
| 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date 06/30/2025 Full name of contributor |
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| Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/30/2025 Bumstead, Alison \$50.00 Contributor address; City; State; Zip Code Eugene, OR 97408 Principal occupation / Job title (See Instructions) Employer (See Instructions) Teacher School Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) School Date Full name of contributor out-of-state PAC (ID#:) O6/27/2025 Full name of contributor out-of-state PAC (ID#:) Principal occupation / Job title (See Instructions) Employer (See Instructions) Contributor address; City; State; Zip Code Amount of Contribution (\$) Pflugerville, TX 78660 Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) O6/30/2025 Full name of contributor out-of-state PAC (ID#:) Date Full name of contributor out-of-state PAC (ID#:) O6/30/2025 Burdick, Maria out-of-state PAC (ID#:) |
| 06/30/2025 Bumstead, Alison \$50.00 Contributor address; City; State; Zip Code Eugene, OR 97408 \$50.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$50.00 Teacher School School \$25.00 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$25.00 06/27/2025 Bunton, Evelyn |
| Contributor address; City; State; Zip Code Eugene, OR 97408 Principal occupation / Job title (See Instructions) Employer (See Instructions) Teacher School Date Full name of contributor out-of-state PAC (ID#:) Bunton, Evelyn Amount of Contribution (\$) Contributor address; City; State; Zip Code Amount of Contribution (\$) Pflugerville, TX 78660 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Full name of contributor out-of-state PAC (ID#:) Anount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Full name of contributor out-of-state PAC (ID#:) Date Full name of contributor out-of-state PAC (ID#:) Od/30/2025 Burdick, Maria out-of-state PAC (ID#:) |
| Eugene, OR 97408 Employer (See Instructions) School Employer (See Instructions) School Date Full name of contributor out-of-state PAC (ID#:) Bunton, Evelyn Amount of Contribution (\$) \$25.00 06/27/2025 Full name of contributor out-of-state PAC (ID#:) Pflugerville, TX 78660 Amount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) Teacher School Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/27/2025 Bunton, Evelyn \$25.00 Contributor address; City; State; Zip Code Pflugerville, TX 78660 \$25.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$25.00 Not Employed Date Full name of contributor address; City; State; Zip Code Amount of Contributor \$25.00 Pflugerville, TX 78660 Employer (See Instructions) Employer (See Instructions) \$25.00 Not Employed Ode/on Out-of-state PAC (ID#:) Amount of Contribution \$30 \$3100.00 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution \$3100.00 \$3100.00 |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) Teacher School Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/27/2025 Bunton, Evelyn \$25.00 Contributor address; City; State; Zip Code Pflugerville, TX 78660 \$25.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$25.00 Not Employed Date Full name of contributor address; City; State; Zip Code Amount of Contributor \$25.00 Pflugerville, TX 78660 Employer (See Instructions) Employer (See Instructions) \$25.00 Not Employed Ode/on Out-of-state PAC (ID#:) Amount of Contribution \$30 \$3100.00 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution \$3100.00 \$3100.00 |
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| Contributor address; City; State; Zip Code Pflugerville, TX 78660 Principal occupation / Job title (See Instructions) Not Employed Date Full name of contributor Od/30/2025 Burdick, Maria |
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| 06/30/2025 Burdick, Maria \$100.00 |
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| |
| Contributor address; City; State; Zip Code |
| |
| |
| Houston, TX 77024 |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) |
| Not Employed Not Employed |
| Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) |
| |
| 06/24/2025 Burge, Dorothy \$100.00 |
| 06/24/2025 Burge, Dorothy \$100.00 Contributor address; City; State; Zip Code |
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| Contributor address; City; State; Zip Code |
| Contributor address; City; State; Zip Code Houston, TX 77005 |
| Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions) |
| Contributor address; City; State; Zip Code Houston, TX 77005 |

| | The Instru | ction Guide explains how to complete this | form. | 1 Total pages Schedule A1: Sch: 28/228 Rpt: 31/272 |
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| 2 | FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| | 06/28/2025 | Burke, Regan | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 |
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| _ | Dringing Loop | Chicago, IL 60611 | | <u> </u> |
| 8 | Principal occu disabled | ipation / Job title (See Instructions) | 9 Employer (See Instructions) Cook County | 3) |
| | | | - | 1 |
| | Date | |) | Amount of Contribution (\$) |
| | 06/28/2025 | | | \$5.00 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | Dallas, TX 75238 | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions) | c) |
| | Not Employe | | Not Employed | >) |
| | Date | | | Amount of Contribution (\$) |
| | Dale 06/30/2025 | Burnside, Mary |) | Amount of Contribution (\$) \$25.00 |
| | | | | ψ20.00 |
| Contributor address; City; State; Zip Code | | | | |
| | | | | |
| | | Austin, TX 78748 | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) | s) |
| | Executive As | ssistant | State of Texas | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/30/2025 | Burton, Sandy | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 |
| | | | | |
| | | | | |
| | | Cedar Park, TX 78613 | | |
| | | ipation / Job title (See Instructions) | Employer (See Instructions) | 5) |
| | Not Employe | 2d | Not Employed | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/23/2025 | Bustos, Anne | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | |
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| | | Coorgotown TV 78628 | | |
| | Drinsipal aga | Georgetown, TX 78628 | | |
| | Principal occu Not Employe | ipation / Job title (See Instructions) | Employer (See Instructions) Not Employed | 3) |
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| 2 FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| Talarico, James (The | Honorable) | | | | 00081913 | |
| 4 Date 5 Full n | name of contributor | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| 06/30/2025 Butc | cher, Michelle | | | | | \$15.00 |
| 6 Contr | ributor address; City; State | | | 1 | | |
| | | | | | | |
| | | | | | | |
| | nd Rock, TX 78681 | | | | | |
| 8 Principal occupation / Jo | ob title (See Instructions) | | 9 Employer (See Instructions | 5) | | |
| not employed | | | none | — | | |
| | name of contributor | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| 06/30/2025 Butler, Rhonda Contributor address; City; State; Zip Code | | | | | \$100.00 | |
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| | | | | | | |
| Au Sable Forks, NY 12912 | | | | | | |
| | · · · · · · · · · · · · · · · · · · · | | Employer (Soo Instructions | | | |
| Not Employed | lob title (See Instructions) | | Employer (See Instructions Not Employed | 5) | | |
| · · · · | | | | — | | |
| Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Butts, Edna Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | ¢100.00 | |
| | | | | | \$100.00 | |
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| | | | | | | |
| Aust | tin, TX 78731 | | | | | |
| Principal occupation / J | lob title (See Instructions) | | Employer (See Instructions | 3) | | |
| Attorney Austin ISD | | Austin ISD | | | | |
| Date Full name of contributor out-of-state PA | | out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| 06/29/2025 Byar | m, Johnetta | , . | | | | \$25.00 |
| | | | | 1 | | |
| | · · · | | | | | |
| | | | | | | |
| San | Antonio, TX 78209 | | | | | |
| | lob title (See Instructions) | | Employer (See Instructions | 3) | | |
| Not Employed | | | Not Employed | | | |
| Date Full n | name of contributor | out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| 06/30/2025 Cabr | rera, Richard E | | | | | \$100.00 |
| Contr | ributor address; City; State | ; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | Lauderdale, FL 33301 | | | | | |
| | lob title (See Instructions) | | Employer (See Instructions | | | |
| Tax Professional | | | Berkowitz Pollack Brant | | | |
| | | | | | | |

| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1: Sch: 30/228 Rpt: 33/272 |
|---|---|
| 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Talarico, James (The Honorable) | 00081913 |
| 4 Date 5 Full name of contributor out-of-state PAC (ID#: |) 7 Amount of Contribution (\$) |
| 06/30/2025 Callahan, Corey | \$25.00 |
| 6 Contributor address; City; State; Zip Code | |
| | |
| Arlington, VA 22206 | |
| 8 Principal occupation / Job title (See Instructions) 9 Emp | loyer (See Instructions) |
| | antir Technologies |
| Date Full name of contributor out-of-state PAC (ID#: |) Amount of Contribution (\$) |
| 06/30/2025 Calle, Lisa | \$25.00 |
| Contributor address; City; State; Zip Code | |
| Contributor address, City, State, Zip Code | |
| | |
| Dallas, TX 75218 | |
| | loyer (See Instructions) |
| | azon |
| Date Full name of contributor out-of-state PAC (ID#: |) Amount of Contribution (\$) |
| 06/30/2025 Camacho, Penny | \$10.00 |
| Contributor address; City; State; Zip Code | |
| Contributor address, City, State, Zip Code | |
| | |
| Devine, TX 78016 | |
| Principal occupation / Job title (See Instructions) Emp | loyer (See Instructions) |
| Not Employed Not | Employed |
| Date Full name of contributor out-of-state PAC (ID#: |) Amount of Contribution (\$) |
| 06/23/2025 Cameron, Ellisa | \$100.00 |
| Contributor address; City; State; Zip Code | |
| | |
| | |
| Austin, TX 78702 | |
| Principal occupation / Job title (See Instructions) Emp | loyer (See Instructions) |
| Not Employed Not | Employed |
| Date Full name of contributor out-of-state PAC (ID#: |) Amount of Contribution (\$) |
| 06/30/2025 Cameron, Natalia | \$25.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Virginia Beach, VA 23451 | |
| Principal occupation / Job title (See Instructions) Emp | loyer (See Instructions) |
| | |
| Not Employed Not | Employed |

| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 31/228 Rpt: 34/272 | |
|-----------------------|--|---|------------------------------|----------------|---|-----------------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | nes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/26/2025 | Camp, Amy | | | | \$25.00 |
| | I | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Troup, TX 75789 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | | tal Investigator | TCEQ | | | |
| ⊨ | Date | Full name of contributor Out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Campagna, Larry | / | | | \$150.00 |
| | | | | | | \$100.00 |
| | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | |
| | | Houston, TX 77007 | | | | |
| \vdash | Drincinal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> -) | | |
| | Attorney | | Chamberlain Hrdlicka |) | | |
| ⊨ | | | | 1 | | |
| | Date Full name of contributor out-of-state PAC (ID#: | |) | | Amount of Contribution (\$) | ±= 00 |
| | 06/28/2025 | Campbell, Latisha | | | | \$5.00 |
| | Contributor address; City; State; Zip Code | | | | | |
| Mount Vernon TX 75457 | | | | | | |
| | | | | | | |
| | | Mount Vernon, TX 75457 | | <u> </u> | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Teacher | | Como-Pickton ISD | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/23/2025 | Canales, Melissa | | | | \$50.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | San Antonio, TX 78247 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | d. | Not Employed | | | |
| F | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Canellos, Christopher | | | | \$25.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Dallas, TX 75214 | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Self Employe | | Restaurant | - | | |
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| | The Instru | ction Guide explains how to co | omplete this form | m. | 1 | Total pages Schedule A1: Sch: 32/228 Rpt: 35/272 | |
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| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | ı Filers) |
| | Talarico, Jar | mes (The Honorable) | | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out- | of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Capps, Emily | | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip |) Code | | | | |
| | | | | | | | |
| | | Atlanta, GA 30316 | | | | | |
| 8 | Principal occu Writer | ipation / Job title (See Instructions) | 9 | Employer (See Instructions Self employed | 5) | | |
| | Date | Full name of contributor out- | -of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Carraway, Robert | | | | | \$100.00 |
| | Contributor address; City; State; Zip Code | | | | | | |
| | | | | | | | |
| | | | | | | | |
| L | | San Antonio, TX 78255 | | | | | |
| | | Ipation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Not Employe | • | | Not Employed | - | | |
| | Date | | of-state PAC (ID#: |) | | Amount of Contribution (\$) | _ |
| | 06/30/2025 Carroll, Karen Contributor address; City; State; Zip Code | | | | | | \$50.00 |
| | | | Code | | | | |
| | | | | | | | |
| | | Stillwater, MN 55082 | | | | | |
| \vdash | Drincinal occu | Ipation / Job title (See Instructions) | | Employer (See Instructions | <u>ا</u> | | |
| | Not Employe | | | Not Employed | <i>י</i> י | | |
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| | Date 06/23/2025 | Full name of contributor out-o | -of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$50.00 |
| | 06/23/2025 | | | | | | ΦΟΟ.ΟΟ |
| | | Contributor address; City; State; Zip | Code | | | | |
| | | 1 | | | | | |
| | | Dallas, TX 75248 | | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| | attorney | • • | | Carrington COleman | , | | |
| ⊨ | Date | Full name of contributor | -of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/25/2025 | Carson, Shae | 01 51415 1715 (12 | / | | , | \$50.00 |
| | - | Contributor address; City; State; Zip |) Code | | | | - |
| | | | 0000 | | | | |
| | | 1 | | | | | |
| | | Camden, AR 71701 | | | | | |
| ┢ | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | . | | |
| | Not Employe | | | Not Employed | | | |
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| The | e Instru | ction Guide explains how to complete this f | orm. | | Total pages Schedule A1: Sch: 33/228 Rpt: 36/272 | |
|--|--------------|---|--|--------------|---|----------|
| 2 FILE | ER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| Tala | arico, Jan | nes (The Honorable) | | | 00081913 | |
| 4 Date | 9 | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| 06/3 | 30/2025 | Carter, John | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| 7 D.i. | · • • • • • | Buda, TX 78610 | | Ĺ | | |
| | | pation / Job title (See Instructions) | 9 Employer (See Instructions) | 5) | | |
| | Employe | | Not Employed | | | |
| Date | | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| 06/3 | 30/2025 | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Austin, TX 78758 | | | | |
| Drine | cipal occu | pation / Job title (See Instructions) | Employer (See Instructions | | | |
| | erations N | | Employer (See Instructions) Ascension | 5) | | |
| | | | | — | | |
| Date | | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | <u> </u> |
| 06/29/2025 Casburn, Kelsey Contributor address; City; State; Zip Code | | | | | | \$25.00 |
| | | | | | | |
| | | | | | | |
| | | Aledo, TX 76008 | | | | |
| Prino | cipal occu | pation / Job title (See Instructions) | Employer (See Instructions) | Ls) | | |
| | Employe | | Not Employed | -, | | |
| Date | | Full name of contributor Out-of-state PAC (ID#: |) | Π | Amount of Contribution (\$) | |
| | - 28/2025 | Case, Freddie | / | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | - | | T |
| | | | | | | |
| | | | | | | |
| | | Littleton, CO 80128 | | | | |
| Princ | cipal occu | pation / Job title (See Instructions) | Employer (See Instructions) | s) | | |
| Not | Employe | d | Not Employed | | | |
| Date | <u>)</u> | Full name of contributor out-of-state PAC (ID#:_ |) | Γ | Amount of Contribution (\$) | |
| 06/3 | 30/2025 | Casiano, Bera | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | San Antonio, TX 78260 |] | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions) | 3) | | |
| Not | Employe | :d | Not Employed | | | |
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| The Instruction | n Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 34/228 Rpt: 37/272 | |
|---|---|--|---------------|---|----------------|
| 2 FILER NAME | | | | Filer ID (Ethics Commission | n Filers) |
| Talarico, James (| (The Honorable) | | | 00081913 | |
| 4 Date 5 F | Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| 06/30/2025 C | Castillo, Guadalupe | | | | \$100.00 |
| 6 (| Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | |
| | Houston, TX 77036 | | | | |
| | | 9 Employer (See Instructions | s) | | |
| Teacher | | Channelview ISD | _, | | |
| Date F | Full name of contributor out-of-state PAC (ID#: |) | Ī | Amount of Contribution (\$) | |
| 06/26/2025 C | Castle, George | | | | \$100.00 |
| C | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | |
| | | | | | |
| I | Austin, TX 78704 | | | | |
| | n / Job title (See Instructions) | Employer (See Instructions | s) | | |
| Engineer | | CACI | | | |
| Date F | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| 06/29/2025 C | Castro, Betty | | | | \$25.00 |
| C | Contributor address; City; State; Zip Code | | 1 | | |
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| , I I I I I I I I I I I I I I I I I I I | | | | | |
| | Austin, TX 78758 | | Ĺ | | |
| Principal occupation Not Employed | n / Job title (See Instructions) | Employer (See Instructions Not Employed | S) | | |
| | | | . | | |
| | Full name of contributor out-of-state PAC (ID#: |) | ' | Amount of Contribution (\$) | * 25 00 |
| | Cerilla, Janine Paola | | | | \$25.00 |
| C | Contributor address; City; State; Zip Code | | | | |
| | | | | | |
| | North Caldwell, NJ 07006 | | | | |
| | n / Job title (See Instructions) | Employer (See Instructions | s) | | |
| Nurse Practitione | | RWJBH | -, | | |
| Date F | Full name of contributor out-of-state PAC (ID#: | | Τ | Amount of Contribution (\$) | |
| | Chaney, William | / | | | \$100.00 |
| | Contributor address; City; State; Zip Code | | • | | |
| | | | | | |
| | | | | | |
| C | Dallas, TX 75214 | | | | |
| Principal occupation | n / Job title (See Instructions) | Employer (See Instructions | s) | | |
| Not Employed | | Not Employed | | | |
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| | The Instru | ction Guide explains how to complete thi | is form. | 1 | Total pages Schedule A1: Sch: 35/228 Rpt: 38/272 | |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | Talarico, Jar | mes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (II | D#:) | 7 | Amount of Contribution (\$) | |
| | 06/23/2025 | Chang, Michael | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | " | | |
| | | | | | | |
| | | | | | | |
| Ļ | <u> </u> | Austin, TX 78754 | | Ļ | | |
| 8 | | ipation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Business co | | Travis county | _ | | |
| | Date | | D#:) | | Amount of Contribution (\$) | |
| | 06/29/2025 | | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Austin, TX 78729 | | | | |
| \vdash | Drincinal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Engineer | | Apple | 5) | | |
| ╞ | _ | | | Т | Amount of Contribution (¢) | |
| | Date 06/27/2025 | Full name of contributor out-of-state PAC (II Chapman, Rob | D#:) | | Amount of Contribution (\$) | \$5.00 |
| | 0012112023 | | | | | ψ3.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Downingtown, PA 19335 | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | ed d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (II | D#:) | Γ | Amount of Contribution (\$) | |
| | 06/27/2025 | Charin, Katherine | | | | \$5.00 |
| | | Contributor address; City; State; Zip Code | | " | | |
| | | | | | | |
| | | | | | | |
| | | Arlington, VA 22203 | | | | |
| | | ipation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Consular Fe | | Department of State | | | |
| | Date | Full name of contributor out-of-state PAC (II | D#:) | | Amount of Contribution (\$) | |
| | 06/25/2025 | Chasse, Joe | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Ft Worth, TX 76179 | | | | |
| ┝ | Dringing occu | | Employor (Soe Instruction | | | |
| | mailhandler | ipation / Job title (See Instructions) | Employer (See Instructions US Postal Service | S) | | |
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| The Instruction Guide explains how to complete this form. 2 FILER NAME 3 | Total pages Schedule A1: | |
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| | Filer ID (Ethics Commission Filer | s) |
| | 00081913 | -, |
| 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 | Amount of Contribution (\$) | |
| 06/30/2025 Chaturvedi, Munish | \$2 | 25.00 |
| 6 Contributor address; City; State; Zip Code | | |
| | | |
| Austin TV 70720 | | |
| Austin, TX 78729 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) | | |
| Account manager Dronesense | | |
| | tt -f Opertuils, tion (Φ) | |
| | Amount of Contribution (\$) | 10.00 |
| 06/23/2025 Cherico, Sondra | LΦ | 10.00 |
| Contributor address; City; State; Zip Code | | |
| | | |
| Austin, TX 78704 | | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | | |
| Not Employed Not Employed | | |
| | Amount of Contribution (\$) | |
| Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Cherico, Sondra | Amount of Contribution (\$) | \$8.00 |
| | 4 | \$0.00 |
| Contributor address; City; State; Zip Code | | |
| | | |
| Austin, TX 78704 | | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | | |
| Not Employed Not Employed | | |
| Not Employed | | |
| | Amount of Contribution (\$) | |
| | Amount of Contribution (\$) \$10 | 00.00 |
| Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Chipman, Ashley | |)0.00 |
| Date Full name of contributor out-of-state PAC (ID#:) | |)0.00 |
| Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Chipman, Ashley | | 00.00 |
| Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Chipman, Ashley | | 00.00 |
| Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Chipman, Ashley Contributor address; City; State; Zip Code | | 00.00 |
| Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Chipman, Ashley Contributor address; City; State; Zip Code Elgin, TX 78621 | | 00.00 |
| Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Chipman, Ashley Contributor address; City; State; Zip Code Elgin, TX 78621 Principal occupation / Job title (See Instructions) Metal 3D Printing | | 00.00 |
| Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Chipman, Ashley Contributor address; City; State; Zip Code Elgin, TX 78621 Principal occupation / Job title (See Instructions) Metal 3D Printing | \$10 Amount of Contribution (\$) | 50.00 |
| Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Chipman, Ashley Contributor address; City; State; Zip Code Elgin, TX 78621 Principal occupation / Job title (See Instructions) Metal 3D Printing Date Full name of contributor Out-of-state PAC (ID#:) | \$10 Amount of Contribution (\$) | |
| Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Chipman, Ashley Contributor address; City; State; Zip Code Elgin, TX 78621 Principal occupation / Job title (See Instructions) Metal 3D Printing Date Full name of contributor 06/25/2025 Chipman, Ashley | \$10 Amount of Contribution (\$) | |
| Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Chipman, Ashley | \$10 Amount of Contribution (\$) | |
| Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Chipman, Ashley Contributor address; City; State; Zip Code Elgin, TX 78621 Principal occupation / Job title (See Instructions) Metal 3D Printing Date Full name of contributor 06/25/2025 Chipman, Ashley | \$10 Amount of Contribution (\$) | |
| Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Chipman, Ashley | \$10 Amount of Contribution (\$) | |

| The Instru | ction Guide explains how to complete this t | form. | 1 Total pages Schedule A1: Sch: 37/228 Rpt: 40/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/23/2025 | Choban, Gregory | | \$25.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | Austin, TX 78731 | | |
| - | upation / Job title (See Instructions) | 9 Employer (See Instructions | s) |
| Not Employe | edb | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#:_ | <u> </u> | Amount of Contribution (\$) |
| 06/30/2025 | Ciccarelli, Sharon | | \$25.00 |
| | Contributor address; City; State; Zip Code | | · |
| | | | |
| | | | |
| | Austin, TX 78723 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/26/2025 | Cicileo, Julie | | \$10.00 |
| | Contributor address; City; State; Zip Code | | · |
| | | | |
| | | | |
| | Long Beach, CA 90803 | | |
| Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | s) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | Cius, Nadine | | \$25.00 |
| | Contributor address; City; State; Zip Code | | · |
| | | | |
| | | | |
| | Houston, TX 77091 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| Broker | | Self | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/29/2025 | Clark, Leighton | | \$25.00 |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| | Fort Worth, TX 76110 | | |
| - | ipation / Job title (See Instructions) | Employer (See Instructions | s) |
| Not Employe | ed | Not Employed | |
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| The Instru | ction Guide explains how to complete | e this form. | 1 Total pages Schedule A1: Sch: 38/228 Rpt: 41/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | nes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor 🔲 out-of-state P | PAC (ID#:) | 7 Amount of Contribution (\$) |
| 06/30/2025 | Clark, Paula | | \$25.00 |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| | Bastrop, TX 78602 | | |
| 8 Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instruction | l s) |
| Not Employe | | Not Employed | _, |
| Date | Full name of contributor Out-of-state P | PAC (ID#:) | Amount of Contribution (\$) |
| 06/29/2025 | Clayton, Michelle | AC (ID#) | \$100.00 |
| 00/20/2020 | | | |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Knoxville, TN 37922 | | |
| Principal occu | I Ipation / Job title (See Instructions) | Employer (See Instruction | l Is) |
| Housewife | | None | |
| Date | Full name of contributor | PAC (ID#:) | Amount of Contribution (\$) |
| 06/30/2025 | Clemons, Robert | , | \$100.00 |
| | | | |
| | | | |
| | | | |
| | Waco, TX 76703 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruction | s) |
| Consultant | | Texas Education Marke | eting LP |
| Date | Full name of contributor out-of-state P | AC (ID#:) | Amount of Contribution (\$) |
| 06/29/2025 | Clifford, Cindy | | \$100.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Houston, TX 77019 | | |
| - | pation / Job title (See Instructions) | Employer (See Instruction | IS) |
| Owner Publi | c Relations Co | the Clifford Group inc. | |
| Date | Full name of contributor 🔲 out-of-state P | PAC (ID#:) | Amount of Contribution (\$) |
| 06/23/2025 | Clifton, Emily | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Austin, TX 78727 | | |
| - | pation / Job title (See Instructions) | Employer (See Instruction | s) |
| Not Employe | ed | Not Employed | |
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| Th | e Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 39/228 Rpt: 42/272 | |
|--------|-------------|---|------------------------------|----|---|----------|
| 2 FILF | ER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | nes (The Honorable) | | ľ | 00081913 | |
| 4 Dat | e | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| 06/ | 30/2025 | Clumpner, Mindy | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Austin, TX 78728 | | | | |
| 8 Prin | ncipal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | t Employe | | Not Employed | , | | |
| Dat | e | Full name of contributor out-of-state PAC (ID#:_ | ·) | Γ | Amount of Contribution (\$) | |
| 06/ | 23/2025 | Cole, F | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Mckinney, TX 75069 | | | | |
| Prin | ncipal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| Not | t Employe | d | Not Employed | | | |
| Dat | e | Full name of contributor out-of-state PAC (ID#:_ | ·) | Γ | Amount of Contribution (\$) | |
| 06/ | 30/2025 | Coleman, Robert | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Dallas, TX 75214 | - | | | |
| Prin | ncipal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| Not | t Employe | d | Not Employed | | | |
| Dat | e | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| 06/ | 30/2025 | Collins Polster, Jodie | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Greenwood Village, CO 80111 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| Not | t Employe | :d | Not Employed | - | | |
| Date | | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| 06/ | 30/2025 | Comer, Candace | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Austin, TX 78749 | | Ĺ | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| Rea | al Estate | Broker | Self | | | |
| Rea | al Estate | Broker | Self | | | |
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|-----|----------------|---|---------------------------------------|-----------|---|----------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 40/228 Rpt: 43/272 | |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | ו Filers) |
| | Talarico, Jar | mes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Conley, Jennifer | | | | \$100.00 |
| | I | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| _ | | Larchmont, NY 10538 | | Ĺ | | |
| | | upation / Job title (See Instructions) | 9 Employer (See Instructions) | 5) | | |
| | Therapist | | Counseling Center | — | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | San Donito TV 78586 | | | | |
| ┝── | Dringinal occu | San Benito, TX 78586 | Employer (See Instructions) | | | |
| | Software Eng | upation / Job title (See Instructions) | Capital One | 5) | | |
| | | | | — | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | #100.00 |
| | 06/24/2025 | Conyngham, Karen | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Austin, TX 78746 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u>ار</u> | | |
| | researcher | | Self | -, | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | |
| | 06/30/2025 | Cook, Jane | / | | Amount of Contribution (4) | \$10.00 |
| | 00,00,2020 | Contributor address; City; State; Zip Code | | | | *1 0.02 |
| | | | | | | |
| | | | | | | |
| | | Durham, NC 27707 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions) | 5) | | |
| | Not Employe | be | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ | | Γ | Amount of Contribution (\$) | |
| | 06/26/2025 | Cook, Susan | | | | \$25.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Driftwood, TX 78619 | | | | |
| | Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions) | s) | | |
| | Not Employe | €d | Not Employed | | | |
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| | The Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 41/228 Rpt: 44/272 | |
|----------|--------------------|---|---|----------------|---|-----------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | Talarico, Jar | nes (The Honorable) | | | 00081913 | - |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Cooksey, Rosa | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Dallas, TX 75248 | i | | | |
| 8 | | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Therapist | | ССНР | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Cooper, Andrea | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | D | | | | |
| | | Bremen, AL 35033 | | Ļ | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | S) | | |
| | Analyst | | HUD | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Cooper, Megan | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Austin TX 79722 | | | | |
| ⊢ | Dringing ago | Austin, TX 78732 | Employer (Cool Instructions | | | |
| | Librarian | pation / Job title (See Instructions) | Employer (See Instructions Leander ISD | 5) | | |
| | | | | | | |
| | Date | Full name of contributor Out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | ¢100.00 |
| | 06/30/2025 | Copeland, Harold D | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Houston, TX 77263 | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | | |
| | Not Employe | | Not Employed | 5) | | |
| ╞ | | | | <u> </u> | Amount of Contribution (ft) | |
| | Date 06/29/2025 | Full name of contributor out-of-state PAC (ID#: Copeland, Harold D |) | | Amount of Contribution (\$) | \$100.00 |
| | 00/29/2025 | | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Houston, TX 77263 | | | | |
| \vdash | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u>і</u> S) | | |
| | Not Employe | | Not Employed | | | |
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|---|----------------|--|------------------------------|----|---|-----------|
| | The Instru | ction Guide explains how to complete this f | orm. | | Total pages Schedule A1: Sch: 42/228 Rpt: 45/272 | |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | Talarico, Jar | nes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| | 06/23/2025 | Coppedge, Donna | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Pflugerville, TX 78660 | | | | |
| 8 | | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Not Employe | ed | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/26/2025 | Coppinger, Maxine | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | La Grange, TX 78945 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | real estate b | roker | self employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/29/2025 | Corrie, Elizabeth | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Atlanta, GA 30307 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Professor | | Emory University | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/29/2025 | Cortez, Desiree | | | | \$5.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Austin, TX 78725 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Admin | | State agency | | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Cortez, George | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Montgomery, TX 77356 | | Ļ | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | 20 | Not Employed | | | |
| | | | | | | |

| | The Instru | ction Guide explains how to complete this | form. | 1 Total pages Schedule A1: Sch: 43/228 Rpt: 46/272 | |
|---|--------------------|---|--|---|----------|
| 2 | FILER NAME | | | 3 Filer ID (Ethics Commission I | Filers) |
| | Talarico, Jar | mes (The Honorable) | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID# | #:) | 7 Amount of Contribution (\$) | |
| | 06/28/2025 | Cossel, Sandi | | | \$10.00 |
| | | 6 Contributor address; City; State; Zip Code | | | |
| | | | | | |
| | | | | | |
| _ | <u> </u> | Abita Springs, LA 70420 | <u> </u> | | |
| 8 | | Ipation / Job title (See Instructions) | 9 Employer (See Instructions | S) | |
| | Not Employe | 1 | Not Employed | - | |
| | Date | — | #:) | Amount of Contribution (\$) | |
| | 06/30/2025 | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | |
| | | | | | |
| | | Austin, TX 78723 | | | |
| | Drincinal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | |
| | Data engine | | Empirical Root | 5) | |
| | - | | · · · · · · · · · · · · · · · · · · · | Amount of Contribution (\$) | |
| | Date 06/29/2025 | Full name of contributor out-of-state PAC (ID# Coverdell, Travis | #:) | Amount of Contribution (\$) | \$100.00 |
| | 0012912025 | | | | Φ100.00 |
| | | Contributor address; City; State; Zip Code | | | |
| | | | | | |
| | | Saint Louis, MO 63122 | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | |
| | MS Assistan | it Principal | Concordia International | School Shanghai | |
| | Date | Full name of contributor out-of-state PAC (ID# | #:) | Amount of Contribution (\$) | |
| | 06/30/2025 | Cox, Meredith | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | |
| | | | | | |
| | | | | | |
| | | Fort Worth, TX 76110 | - | | |
| | | Ipation / Job title (See Instructions) | Employer (See Instructions | S) | |
| | Occupationa | al Therapist Assistant | Encompass Health | | |
| | Date | Full name of contributor out-of-state PAC (ID# | #:) | Amount of Contribution (\$) | |
| | 06/30/2025 | Coyle, Susan | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | |
| | | | | | |
| | | Albuquerque, NM 87114 | | | |
| | Dringingl occu | | Employer (Soo Instructions | <u> </u> | |
| | Not Employe | Ipation / Job title (See Instructions) | Employer (See Instructions Not Employed | 5) | |
| | | ;u | Νυι Επιριογέα | | |
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| T | he Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 44/228 Rpt: 47/272 |
|-------------|--------------|---|--|---|
| 2 FI | LER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | | nes (The Honorable) | | 00081913 |
| 4 Da | ate | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06 | 6/30/2025 | Cradduck, Brandy | | \$50.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 |
| | | | | |
| | | San Antonio, TX 78254 | | |
| 8 Pr | incipal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions) | 5) |
| | ot Employe | | Not Employed | |
| Da | ate | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 6/30/2025 | Craig, Alexis | | \$25.00 |
| | | | | • |
| | | | | |
| | | | | |
| | | White Settlement, TX 76108 | | |
| Pr | incipal occu | pation / Job title (See Instructions) | Employer (See Instructions) | s) |
| At | ttorney | | Freeman Mills PC | |
| Da | ate | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06 | 6/30/2025 | Craig, Jared | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 |
| | | | | |
| | | | | |
| | | Lake Park, FL 33403 | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions) | 5) |
| М | ental healt | h technician | UF Health | |
| Da | ate | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06 | 6/23/2025 | Crain, Kenneth | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | 1 |
| | | | | |
| | | | | |
| | | Georgetown, TX 78628 | | |
| | | ipation / Job title (See Instructions) | Employer (See Instructions) | s) |
| aı | torney | | self | |
| | ate | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06 | 6/28/2025 | Crawford, Ashley | | \$5.00 |
| | | Contributor address; City; State; Zip Code | |] |
| | | | | |
| | | | | |
| | | Houston, TX 77009 | | |
| | | Ipation / Job title (See Instructions) | Employer (See Instructions) Texas Childrens | 5) |
| R | egistered N | lurse | Texas Criliurens | |
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| т | he Instru | ction Guide explains how to complete this | form. | | Total pages Schedule A1: Sch: 45/228 Rpt: 48/272 | |
| 2 F | ILER NAME | | | 3 1 | Filer ID (Ethics Commission | Filers) |
| Т | ʿalarico, Jar | nes (The Honorable) | | | 00081913 | - |
| 4 D | Date | 5 Full name of contributor out-of-state PAC (ID# | #:) | 7 | Amount of Contribution (\$) | |
| 0 | 6/25/2025 | Crawford, Ashley | | | | \$5.00 |
| | I | 6 Contributor address; City; State; Zip Code | | " | | |
| | | | I | | | |
| | | | I | | | |
| | | Houston, TX 77009 | | | | |
| | | ipation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| R | Registered N | Jurse | Texas Childrens | | | |
| D | Date | Full name of contributor out-of-state PAC (ID# | #:) | Γ, | Amount of Contribution (\$) | |
| 0 | 6/29/2025 | Crist, Candace | | | | \$25.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Houston, TX 77008 | | | | |
| | • | pation / Job title (See Instructions) | Employer (See Instructions | s) | | _ |
| N | Not Employe | 2d | Not Employed | | | |
| D | Date | Full name of contributor out-of-state PAC (ID# | #:) | Ţ, | Amount of Contribution (\$) | |
| 0 | 6/26/2025 | Crist, Candace | | | | \$25.00 |
| | I | Contributor address; City; State; Zip Code | | " | | |
| | | | | | | |
| | | | I | | | |
| | | Houston, TX 77008 | | | | |
| | | ipation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| N | Not Employe | ;d | Not Employed | | | |
| D | Date | Full name of contributor Out-of-state PAC (ID# | #:) | Τ, | Amount of Contribution (\$) | |
| 0 | 6/30/2025 | Crowley-Galvin, Susan | | | | \$10.00 |
| | 1 | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | I | | | |
| | | Round Rock, TX 78681 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| S | Social Worke | er | Self Employed | | | |
| D | Date | Full name of contributor Out-of-state PAC (ID# | | Ţ, | Amount of Contribution (\$) | |
| 0 | 6/27/2025 | Curtis, Kevin | | | | \$25.00 |
| | I | Contributor address; City; State; Zip Code | 1 | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Houston, TX 77023 | | | | |
| | | ipation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| N | Not Employe | ed | Not Employed | | | |
| | | | | | | |

| The Instru | iction Guide explains how to complete this | form. | 1 Total pages Schedule A1: Sch: 46/228 Rpt: 49/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Ja | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID# | #:) | 7 Amount of Contribution (\$) |
| 06/28/2025 | D Piner, Elizabeth | | \$25.00 |
| | 6 Contributor address; City; State; Zip Code | , | 1 |
| | | | |
| | Austin, TX 78729 | | |
| 8 Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | s) |
| Not Employ | | Not Employed | 5) |
| Date | |) | Amount of Contribution (\$) |
| 06/28/2025 | D'Orsogna, Paula | · | \$25.00 |
| | Contributor address; City; State; Zip Code | | • |
| | | | |
| | | | |
| | Boerne, TX 78006 | | |
| - | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| Not Employ | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID# | #:) | Amount of Contribution (\$) |
| 06/23/2025 | Dabrowski, Jan | | \$25.00 |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| Dringingloog | Portland, OR 97229 | Employer (Cool potruction | - |
| Not Employ | upation / Job title (See Instructions) ed | Employer (See Instructions Not Employed | 5) |
| | | | 1 Amount of Constribution (#) |
| Date 06/30/2025 | Full name of contributor out-of-state PAC (ID# Dailey, Charlene | t:) | Amount of Contribution (\$) \$20.00 |
| 0013012023 | - | | φ20.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Pflugerville, TX 78660 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| Not Employ | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID# | | Amount of Contribution (\$) |
| 06/30/2025 | Dailey, Jim | | \$50.00 |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| | Round Rock, TX 78681 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | |
| Unemploye | t | NONE That is what UNE | EMPLOYED means. |
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| The Instru | ction Guide explains how to complete this f | form. | 1 Total pages Schedule A1: Sch: 47/228 Rpt: 50/272 | |
|------------------|---|------------------------------|---|---------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission File | ers) |
| | mes (The Honorable) | | 00081913 | , |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) | |
| 06/29/2025 | Dalton, Julie | | \$ | \$50.00 |
| | 6 Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Pearland, TX 77584 | | | |
| 8 Principal occl | upation / Job title (See Instructions) | 9 Employer (See Instructions |) ;) | |
| | coach and Founder | Executive Insight Consu | | |
| Date | Full name of contributor Out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/30/2025 | Daugherty, Kayla | / | | 50.00 |
| 00,00,2022 | | | Ŧ | 00100 |
| | כטוונווטענטו מעעודבי, כונץ, כומנל, בוף כטעב | | | |
| | | | | |
| | Houston, TX 77009 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | 3) | |
| Educator | | Galena Park ISD | | |
| Date | Full name of contributor Out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/28/2025 | Davis, Frank | | | \$5.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Cincinnati, OH 45217 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | .) .) | |
| self-employe | ed | self | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/23/2025 | Davis, Frank | | \$ | \$25.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Cincinnati, OH 45217 | | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | ;) | |
| self-employe | 3d | self | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/30/2025 | Davis, Jill | | \$ | \$50.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Madison, WI 53711 | <u> </u> | | |
| - | upation / Job title (See Instructions) | Employer (See Instructions | | |
| Not Employe | ed | Not Employed | | |
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| | The Instru | ction Guide explains how to compl | lete this for | n. | 1 | Total pages Schedule A1: Sch: 48/228 Rpt: 51/272 | |
|---|----------------|--|---------------|----------------------------|-----|---|----------|
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Talarico, Jar | nes (The Honorable) | | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-sta | te PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/27/2025 | Davis, Jordon | | | | | \$250.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Dallas, TX 75225 | | | | | |
| 8 | | pation / Job title (See Instructions) | 9 | Employer (See Instructions | 5) | | |
| | Sr Client Dire | ector | | LCN Services | | | |
| | Date | Full name of contributor 🛛 out-of-sta | ite PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/26/2025 | Davis, Paul & Beth | | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Pflugerville, TX 78660 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Not Employe | d | | Not Employed | | | |
| | Date | Full name of contributor 🛛 out-of-sta | te PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/24/2025 | Davison, Daniel | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | e | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Houston, TX 77005 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | sales | | | B&B Solutions | | | |
| | Date | Full name of contributor 🛛 out-of-sta | ite PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/24/2025 | De Luna, Alisa | | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Round Rock, TX 78664 | | | | | |
| | - | pation / Job title (See Instructions) | | Employer (See Instructions | | | |
| | Non-profit Di | rector | | Volunteer Legal Service | s c | f Central Texas | |
| | Date | Full name of contributor 🛛 out-of-sta | te PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/29/2025 | DeGroot, Mike | | | | | \$12.50 |
| | | Contributor address; City; State; Zip Cod | е | | 1 | | |
| | | | | | | | |
| | | | | | | | |
| | | Dallas, TX 75214 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Not Employe | d | | Not Employed | | | |
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| The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 49/228 Rpt: 52/272 | |
|----------------|---|------------------------------|---|------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) | |
| | mes (The Honorable) | | 00081913 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) | |
| 06/30/2025 | DeMoss, Kimberly | | \$25 | i.00 |
| | 6 Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Cypress, TX 77429 | | | |
| | upation / Job title (See Instructions) | 9 Employer (See Instructions |) | |
| Teacher | | TISD | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 06/30/2025 | Decell, Kim | | \$25 | i.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Willis, TX 77318 | | | |
| Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions |) | |
| Not Employe | ed | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 06/30/2025 | Deering, Michelle | | \$25 | i.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Longview, TX 75604 | | | |
| Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions |) | |
| Healthcare | | CHRISTUS Health | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 06/28/2025 | Dehghan, Maria | | \$25 | i.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | El Paso, TX 79938 | | | |
| Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions |) | |
| Not Employe | ed | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 06/30/2025 | Delbou, Theresa | | \$10 | 00.0 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Argyle, TX 76226 | | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | |
| Senior Clain | ns Manager | Texas Mutual | | |
| | | 1 | | |
| | | | | |

| The Instruction Guide explains how to complete this form. | | Total pages Schedule A1: Sch: 50/228 Rpt: 53/272 | |
|--|----------|---|----------------|
| 2 FILER NAME | 3 | Filer ID (Ethics Commissio | on Filers) |
| Talarico, James (The Honorable) | | 00081913 | |
| 4 Date 5 Full name of contributor out-of-state PAC (ID#:) |) 7 | Amount of Contribution (\$) | |
| 06/30/2025 Dereska, Antoinette | | | \$100.00 |
| 6 Contributor address; City; State; Zip Code | | | |
| | | | |
| Highland Village, TX 75077 | | | |
| 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruct | tions) | | |
| Admin Mead park | | | |
| Date Full name of contributor out-of-state PAC (ID#:) |) | Amount of Contribution (\$) | |
| 06/26/2025 Dessormeau, Pamela | | | \$5.00 |
| Contributor address; City; State; Zip Code | | | |
| | | | |
| | | | |
| Dayton, TN 37321 | | | |
| Principal occupation / Job title (See Instructions) Employer (See Instruct | tions) | | |
| Not Employed Not Employed | | | |
| Date Full name of contributor out-of-state PAC (ID#:) |) | Amount of Contribution (\$) | |
| 06/30/2025 Detmering, Mary | | | \$1,000.00 |
| Contributor address; City; State; Zip Code | | | |
| | | | |
| | | | |
| Houston, TX 77005 | | | |
| Principal occupation / Job title (See Instructions) Employer (See Instruct | tions) | | |
| Not Employed Not Employed | | | |
| Date Full name of contributor out-of-state PAC (ID#:) |) | Amount of Contribution (\$) | _ |
| 06/25/2025 Devlin, Brenda | | | \$20.00 |
| Contributor address; City; State; Zip Code | | | |
| | | | |
| Dallas, TX 75209 | | | |
| Principal occupation / Job title (See Instructions) Employer (See Instruct | tione) | | |
| Not Employed Not Employed | llonsj | | |
| | | | |
| Date Full name of contributor out-of-state PAC (ID#:) |) 1 | Amount of Contribution (\$) | \$50.00 |
| | <i>,</i> | | |
| 06/29/2025 DiMasi, Rachel | | | ψ30.00 |
| Contributor address; City; State; Zip Code | | | ψ30.00 |
| | | | \$30.00 |
| Contributor address; City; State; Zip Code | | | \$30.00 |
| Contributor address; City; State; Zip Code Austin, TX 78727 | | | |
| Contributor address; City; State; Zip Code Austin, TX 78727 Principal occupation / Job title (See Instructions) Employer (See Instruct | | | |
| Contributor address; City; State; Zip Code Austin, TX 78727 | | | \$50.00 |

| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 51/228 Rpt: 54/272 | |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | Talarico, Jar | mes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor Out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Diehl, David | | | | \$100.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Houston, TX 77004 | | | | |
| 8 | Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Not Employe | ed | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ |) | Γ | Amount of Contribution (\$) | |
| | 06/24/2025 | Dienger, Patrick | | | | \$5.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Winona, MN 55987 | | | | |
| | Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Executive Di | irector | La Crosse County HA | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/25/2025 | Dietrichs, Jay | | | | \$40.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Portland, OR 97219 | · · · · · · | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | S) | | |
| | Not employe | | Not employed | - | | |
| | Date | |) | | Amount of Contribution (\$) | + 00 |
| | 06/27/2025 | Ditomaso, Nancy | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Fanwood, NJ 07023 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | | |
| | College Prof | | Rutgers University | ., | | |
| ╞ | Date | Full name of contributor out-of-state PAC (ID#: | | Т | Amount of Contribution (\$) | |
| | 06/27/2025 | Dobervich, Jane | / | | | \$25.00 |
| | 00,21,2022 | Contributor address; City; State; Zip Code | | - | | ¥20.02 |
| | | CUltinutur address, City, State, Lip Code | | | | |
| | | | | | | |
| | | Tyler, TX 75703 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Not Employe | | Not Employed | | | |
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| The Instru | uction Guide explains how to complete this | s form. | 1 Total pages Schedule A1: Sch: 52/228 Rpt: 55/272 |
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| 2 FILER NAMI | E | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Ja | ames (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID | #:) | 7 Amount of Contribution (\$) |
| 06/25/2025 | | | \$100. |
| | 6 Contributor address; City; State; Zip Code | | |
| | Austin, TX 78731 | | |
| 8 Principal occ | cupation / Job title (See Instructions) | 9 Employer (See Instruction | s) |
| Not Employ | ved | Not Employed | |
| Date | Full name of contributor Out-of-state PAC (ID | #:) | Amount of Contribution (\$) |
| 06/30/2025 | — — | | \$10 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Austin, TX 78705 | | |
| Principal occ | cupation / Job title (See Instructions) | Employer (See Instruction | s) |
| - | uate Lab Assistant | University of Texas at A | |
| | | | |
| Date | — | #:) | Amount of Contribution (\$) |
| 06/25/2025 | Donahue, Robert | | |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Grapevine, TX 76051 | | |
| | cupation / Job title (See Instructions) | Employer (See Instruction | s) |
| Not Employ | /ed | Not Employed | |
| Date | Full name of contributor Dut-of-state PAC (ID | #:) | Amount of Contribution (\$) |
| 06/30/2025 | | | \$25. |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Arlington, TX 76001 | | |
| Principal occ | cupation / Job title (See Instructions) | Employer (See Instruction | s) |
| Educator | | Mansfield ISD | |
| Date | Full name of contributor Out-of-state PAC (ID | #:) | Amount of Contribution (\$) |
| 06/30/2025 | — — | | \$500. |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Dallas, TX 75214 | | |
| Principal occ | cupation / Job title (See Instructions) | Employer (See Instruction | LS) |
| Not Employ | | Not Employed | · |
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| | The Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 53/228 Rpt: 56/272 | |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | | nes (The Honorable) | | | 00081913 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID# |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Doscher, David | | | | \$100.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | 0-1 D TV 70010 | | | | |
| Ļ | Dringing occu | Cedar Park, TX 78613 pation / Job title (See Instructions) | Employor (Soo Instructions | <u> </u> | | |
| ò | Computer Pr | | 9 Employer (See Instructions AMD | S) | | |
| ╘ | - | - | | 1 | | |
| | Date | |) | | Amount of Contribution (\$) | ÷05.00 |
| | 06/29/2025 | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | San Antonio, TX 78232 | | | | |
| <u> </u> | Drincinal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Not Employe | | Not Employed | 5) | | |
| ╞ | | | | . | | |
| | Date | | :) | | Amount of Contribution (\$) | * 25 00 |
| | 06/30/2025 | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Austin, TX 78748 | | | | |
| ┝ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | e) | | |
| | Not Employe | | Not Employed | 5) | | |
| ⊨ | | | | Т | Amount of Contribution (¢) | |
| | Date 06/30/2025 | Dufner, Robin | :) | | Amount of Contribution (\$) | \$25.00 |
| | 00/30/2023 | | | | | φ23.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Austin, TX 78731 | | | | |
| \vdash | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Permissions | | Pearson | -, | | |
| ⊢ | Date | Full name of contributor Out-of-state PAC (ID#: | <u> </u> | Τ | Amount of Contribution (\$) | |
| | 06/23/2025 | Dukes, Glenn | · | | | \$500.00 |
| | | Contributor address; City; State; Zip Code | | · | | |
| | | | | | | |
| | | | | | | |
| | | Austin, TX 78746 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | ed | Not Employed | | | |
| ⊢ | | | | | | |
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| | The Instru | ction Guide explains how to complete this | s form. | 1 | Total pages Schedule A1: Sch: 54/228 Rpt: 57/272 | |
|---|--------------|--|------------------------------|-----|---|-----------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | | mes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID: | #:) | 7 | Amount of Contribution (\$) | |
| | 06/26/2025 | Dumas, Joy | | | | \$200.00 |
| | | 6 Contributor address; City; State; Zip Code | | " | | |
| | | | | | | |
| | | | | | | |
| | | Round Rock, TX 78681 | | | | |
| 8 | | upation / Job title (See Instructions) | 9 Employer (See Instructions | is) | | |
| | Not Employe | ed | Not Employed | | | |
| F | Date | Full name of contributor out-of-state PAC (ID: | #:) | T | Amount of Contribution (\$) | |
| | 06/30/2025 | Duncan, Carol | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | " | | |
| | | | | | | |
| | | | | | | |
| | | Austin, TX 78759 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | is) | | |
| | Teacher (ret | tired now subbing) | Round Rock ISD | | | |
| | Date | Full name of contributor out-of-state PAC (ID; | #:) | Ī | Amount of Contribution (\$) | |
| | 06/23/2025 | Dunn, Shari | | | | \$15.00 |
| | | Contributor address; City; State; Zip Code | | " | | |
| | | | | | | |
| | | | | | | |
| | | Round Rock, TX 78681 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instruction | IS) | | |
| | Claims Adjus | ster | Progressive | | | |
| | Date | Full name of contributor out-of-state PAC (ID; | #:) | Τ | Amount of Contribution (\$) | |
| | 06/25/2025 | Dunn, Shari | | | | \$15.00 |
| | | Contributor address; City; State; Zip Code | | " | | |
| | | | | | | |
| | | | | | | |
| | <u> </u> | Round Rock, TX 78681 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | IS) | | |
| | Claims Adjus | ster | Progressive | | | |
| | Date | Full name of contributor out-of-state PAC (ID; | #:) | | Amount of Contribution (\$) | |
| | 06/26/2025 | Duplissey, Claude | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | " | | |
| | | | | | | |
| | | | | | | |
| | | San Marcos, TX 78666 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | is) | | |
| | Not Employe | 3d | Not Employed | | | |
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| The Instru | iction Guide explains how to complete this f | form. | 1 Total pages Schedule A1: Sch: 55/228 Rpt: 58/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/30/2025 | Durio, Jackie | | \$50.0 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | Austin TV 70720 | | |
| • Drincinal occu | Austin, TX 78728 upation / Job title (See Instructions) | 9 Employer (See Instructions | <u></u> |
| Software De | | New Meridian | >) |
| | | | المعتقد مع Contribution (Φ) |
| Date 06/23/2025 | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) \$20.0 |
| 00/23/2025 | | | φ20.0 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Cedar Park, TX 78613 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) |
| | elf employed pet sitter and craft sales | Patricia G. Duron | ·/ |
| Date | Full name of contributor out-of-state PAC (ID#: | <u> </u> | Amount of Contribution (\$) |
| 06/23/2025 | Duthie, James | / | \$10.0 |
| 00.20.222 | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Dallas, TX 75214 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | \$) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/23/2025 | Duty, David | | \$50.0 |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| | Lakeway, TX 78734 | i | |
| | upation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | Dwivedi, Jennifer | | \$25.0 |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| | Lakeway, TX 78738 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | \$) |
| Content Lea | .der | Hyatt hotels | |
| | | | |

| The Instru | ction Guide explains how to complete this f | form. | 1 Total pages Schedule A1: Sch: 56/228 Rpt: 59/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jai | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/23/2025 | E Lawrence, Megan | | \$50.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| a al indian | Austin, TX 78727 | | Į |
| 8 Principal occu Marketing | upation / Job title (See Instructions) | 9 Employer (See Instructions) Nearpod | ;) |
| | | | T |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | | | \$50.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | San Antonio, TX 78254 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| Not Employe | | Not Employed | <i>''</i> |
| Date | |) | Amount of Contribution (\$) |
| 06/26/2025 | Edelmann, Patricia | / | \$25.00 |
| | Contributor address; City; State; Zip Code | | • |
| | | | |
| | | | |
| | Austin, TX 78703 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | |
| Teacher | | Rawson Saunders Scho | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/28/2025 | Edmondson, Cynthia | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Leveton TV 77025 | | |
| Dringinal occu | Houston, TX 77035 upation / Job title (See Instructions) | Employer (See Instructions | |
| Not Employe | | Not Employed | ;) |
| | | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/29/2025 | Edwards, Judson | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Cedar Park, TX 78613 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> ;) |
| Not Employe | | Not Employed | , , |
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|---|----------------|--|---------------------------|---------------------------------------|----------------|---|---------|
| | The Instru | ction Guide explains how to | o complete this f | orm. | 1 | Total pages Schedule A1: Sch: 57/228 Rpt: 60/272 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | mes (The Honorable) | | | | 00081913 | - |
| 4 | Date | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Edwards, Kyle | | | | | \$50.00 |
| | | 6 Contributor address; City; State | | | 1 | | |
| | | | | | | | |
| | | Charlotte, NC 28262 | | | | | |
| 8 | | pation / Job title (See Instructions) | | 9 Employer (See Instructions | | | |
| | Sr. Developr | ment Engineer | | Continental Tires the An | mer | icas | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| | 06/25/2025 | Egging, Darcy | | | | | \$25.00 |
| | | Contributor address; City; State | | | 1 | | |
| | | | | | | | |
| | | | | | | | |
| | | Tomball, TX 77377 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
| | Not Employe | 2d | | Not Employed | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Ī | Amount of Contribution (\$) | |
| | 06/30/2025 | Egging, Darcy | | | | | \$25.00 |
| | | Contributor address; City; State | e; Zip Code | | 1 | | |
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| | | | | | | | |
| | <u> </u> | Tomball, TX 77377 | | · · · · · · · · · · · · · · · · · · · | _ | | |
| | | ipation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
| | Not Employe | | | Not Employed | - | | |
| | Date | Full name of contributor |] out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| | 06/27/2025 | Ehnstrom, Laura | | | | | \$25.00 |
| | | Contributor address; City; State | | | | | |
| | | | | | | | |
| | | San Antonio, TX 78230 | | | | | |
| ┝ | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u>ا</u> د) | | |
| | Not Employe | | | Not Employed | 3) | | |
| ⊨ | Date | Full name of contributor | | ····· | Т | Amount of Contribution (\$) | |
| | 06/25/2025 | Ehrenkranz, andra | out-of-state PAC (ID#: | / | | | \$25.00 |
| | 0012312023 | | | | | | Ψ20.00 |
| | | Contributor address; City; State | e; Zip Code | | | | |
| | | | | | | | |
| | | New York, NY 10021 | | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> s) | | |
| | Not employe | | | Not employed | -) | | |
| — | | | | | | | |
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| The Instruc | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 58/228 Rpt: 61/272 | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission | Filers) |
| Talarico, Jan | nes (The Honorable) | | 00081913 | |
| 4 Date | Date 5 Full name of contributor Image: out-of-state PAC (ID#:) | | 7 Amount of Contribution (\$) | |
| 06/26/2025 | Eisenberg, Anna | | | \$50.00 |
| | 6 Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Austin, TX 78756 | | | |
| | pation / Job title (See Instructions) | 9 Employer (See Instructions) | 3) | |
| Program Spe | ecialist | Texas Health and Huma | an Services | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/26/2025 | Eisenberg, Mary | | | \$30.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Lockhart, TX 78644 | | | |
| | pation / Job title (See Instructions) | Employer (See Instructions) | s) | |
| Not Employe | :d | Not Employed | | |
| D-t- | | | Amount of Contribution (\$) | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | | |
| Date 06/30/2025 | Eisenberg, Rebecca | | Amount of Contribution (\$) | \$50.00 |
| | | | | \$50.00 |
| | Eisenberg, Rebecca | | Amount of Contribution (\$) | \$50.00 |
| | Eisenberg, Rebecca | | Amount of Contribution (\$) | \$50.00 |
| 06/30/2025 | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 | | Amount of Contribution (\$) | \$50.00 |
| 06/30/2025 Principal occu | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 pation / Job title (See Instructions) | Employer (See Instructions) | | \$50.00 |
| 06/30/2025 | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 pation / Job title (See Instructions) | | | \$50.00 |
| 06/30/2025 Principal occu | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 pation / Job title (See Instructions) | Employer (See Instructions) Not Employed | | \$50.00 |
| 06/30/2025 Principal occup Not Employe | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Elander, Nancy | Employer (See Instructions) Not Employed | 5) | \$50.00 |
| 06/30/2025 Principal occup Not Employe Date | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ | Employer (See Instructions) Not Employed | 5) | |
| 06/30/2025 Principal occup Not Employe Date | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Elander, Nancy | Employer (See Instructions) Not Employed | 5) | |
| 06/30/2025 Principal occup Not Employe Date | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Elander, Nancy Contributor address; City; State; Zip Code | Employer (See Instructions) Not Employed | 5) | |
| 06/30/2025 Principal occup Not Employe Date 06/30/2025 | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Elander, Nancy Contributor address; City; State; Zip Code Sherman Oaks, CA 91403 | Employer (See Instructions) Not Employed | S) Amount of Contribution (\$) | |
| 06/30/2025 Principal occup Not Employe Date 06/30/2025 Principal occup | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Elander, Nancy Contributor address; City; State; Zip Code | Employer (See Instructions) Not Employed) Employer (See Instructions) | S) Amount of Contribution (\$) | |
| 06/30/2025 Principal occup Not Employe Date 06/30/2025 | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Elander, Nancy Contributor address; City; State; Zip Code Sherman Oaks, CA 91403 | Employer (See Instructions) Not Employed | S) Amount of Contribution (\$) | |
| 06/30/2025 Principal occup Not Employe Date 06/30/2025 Principal occup | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Elander, Nancy Contributor address; City; State; Zip Code Sherman Oaks, CA 91403 | Employer (See Instructions) Not Employed) Employer (See Instructions) | S) Amount of Contribution (\$) | |
| 06/30/2025 Principal occup Not Employe Date 06/30/2025 Principal occup Manager | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Elander, Nancy Contributor address; City; State; Zip Code Sherman Oaks, CA 91403 pation / Job title (See Instructions) | Employer (See Instructions) Not Employed) Employer (See Instructions) | Amount of Contribution (\$) Amount of Contribution (\$) | |
| 06/30/2025 Principal occup Not Employe Date 06/30/2025 Principal occup Manager Date | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Elander, Nancy Contributor address; City; State; Zip Code Sherman Oaks, CA 91403 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ | Employer (See Instructions) Not Employed) Employer (See Instructions) | Amount of Contribution (\$) Amount of Contribution (\$) | \$50.00 |
| 06/30/2025 Principal occup Not Employe Date 06/30/2025 Principal occup Manager Date | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 pation / Job title (See Instructions) ed Full name of contributor | Employer (See Instructions) Not Employed) Employer (See Instructions) | Amount of Contribution (\$) Amount of Contribution (\$) | \$50.00 |
| 06/30/2025 Principal occup Not Employe Date 06/30/2025 Principal occup Manager Date | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 pation / Job title (See Instructions) ed Full name of contributor | Employer (See Instructions) Not Employed) Employer (See Instructions) | Amount of Contribution (\$) Amount of Contribution (\$) | \$50.00 |
| 06/30/2025 Principal occup Not Employe Date 06/30/2025 Principal occup Manager Date | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 pation / Job title (See Instructions) ed Full name of contributor | Employer (See Instructions) Not Employed) Employer (See Instructions) | Amount of Contribution (\$) Amount of Contribution (\$) | \$50.00 |
| 06/30/2025 Principal occup Not Employe Date 06/30/2025 Principal occup Manager Date 06/23/2025 | Eisenberg, Rebecca Contributor address; City; State; Zip Code Houston, TX 77005 pation / Job title (See Instructions) ed Full name of contributor | Employer (See Instructions) Not Employed) Employer (See Instructions) | Amount of Contribution (\$) Amount of Contribution (\$) Amount of Contribution (\$) Amount of Contribution (\$) | \$50.00 |

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|---|----------------|--|------------------------------|----------|---|-----------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 59/228 Rpt: 62/272 | |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | | mes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Elledge, Richard | | | | \$100.00 |
| | I | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | San Antonio, TX 78209 | | | | |
| 8 | | upation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | physician | | retired | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) | |
| | 06/26/2025 | Eller, Susan | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | · | | |
| | | | | | | |
| | | | | | | |
| | | Lawrenceville, GA 30046 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | ed | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Ellis, Donna | | | | \$100.00 |
| | I | Contributor address; City; State; Zip Code | | " | | |
| | | | | | | |
| | | | | | | |
| | | Birmingham, AL 35210 | 1 | <u> </u> | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | HR | | Amazon | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/26/2025 | Ellis, Helen K | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Little Elm, TX 75068 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Contractor - | Risk Manager | Randstad Digital (Bank | of A | America) | |
| ╞ | Date | Full name of contributor out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) | |
| | 06/30/2025 | Ellis, Mary | | | , | \$50.00 |
| | | Contributor address; City; State; Zip Code | | · | | |
| | | | | | | |
| | | | | | | |
| | | Katy, TX 77449 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | ed | Not Employed | | | |
| | | | <u> </u> | | | |
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| | The Instru | ction Guide explains how to comple | ete this for | rm. | 1 | Total pages Schedule A1: Sch: 60/228 Rpt: 63/272 | |
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| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | mes (The Honorable) | | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state | e PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/25/2025 | Elton, John | | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | | ĺ | | |
| | | | | | | | |
| | | League City, TX 77573 | | | | | |
| 8 | | upation / Job title (See Instructions) | 9 | B Employer (See Instructions | 5) | | |
| | Not Employe | d. | | Not Employed | | | |
| | Date | Full name of contributor out-of-state | e PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Emmerich, Daniela | | | | | \$25.00 |
| | | | | | | | |
| | | | | | | | |
| | | 1 | | | | | |
| | | Kingwood, TX 77339 | | | | | |
| | Principal occu | upation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> ו) | | |
| | Teacher | | | Humble ISD | " | | |
| ⊨ | | | L | | - | | |
| | Date | | e PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/25/2025 | Engebretson, Cathy | | | | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | 1 | | | | | |
| | | 1 | | | | | |
| | | Coburg, OR 97408 | | | | | |
| | Principal occu | ipation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Accounting | | | Market of Choice | | | |
| F | Date | Full name of contributor out-of-state | e PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Erdmann, Chelsea | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | 1 | | | | | |
| | | Magnolia, TX 77354 | | | | | |
| | Principal occu | upation / Job title (See Instructions) | | Employer (See Instructions | <u>ا</u> ة) | | |
| | Marketing | | | Vistra Corp | | | |
| ⊢ | Date | Full name of contributor | e PAC (ID#: | | | Amount of Contribution (\$) | |
| | 06/30/2025 | Erhart, Jenna | | / | | Allount of Contribution (+) | \$25.00 |
| | 00/00/2020 | | , | | | | Ψ20.00 |
| | | Contributor address; City; State; Zip Code | 1 | | | | |
| | | 1 | | | | | |
| | | Destroy TV 70600 | | | | | |
| ∟ | | Bastrop, TX 78602 | | | | | |
| | | ipation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Nurse | | | Allegiance | _ | | |
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| The Instr | ruction Guide explains how to complete this f | form. | 1 Total pages Schedule A1: Sch: 61/228 Rpt: 64/272 |
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| 2 FILER NAM | E | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, J | ames (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) |
| 06/30/2029 | | | \$5.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | Round Rock, TX 78665 | | |
| 8 Principal oc | cupation / Job title (See Instructions) | 9 Employer (See Instructions | s) |
| Not Emplo | | Not Employed | " |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/25/202 | | | \$50.00 |
| | Contributor address; City; State; Zip Code | | 1 |
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| | | | |
| | Riverside, WA 98849 | | |
| - | cupation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Self | | Self | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/29/2025 | | | \$100.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Spicewood, TX 78669 | | |
| Principal oc | L cupation / Job title (See Instructions) | Employer (See Instructions | <u> </u> 6) |
| Not Emplo | | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/26/2025 | | | \$25.00 |
| | Contributor address; City; State; Zip Code | | 1 |
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| | | | |
| | Polson, MT 59860 | | |
| | cupation / Job title (See Instructions) | Employer (See Instructions | <i>;</i>) |
| Not Emplo | | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/28/2025 | | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Anahuac, TX 77514 | | |
| Principal oc | cupation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) |
| Not Emplo | | Not Employed | <i>"</i> |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 62/228 Rpt: 65/272 | |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | ı Filers) |
| | Talarico, Jar | mes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Fancher, Chris | | | | \$50.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| _ | | Round Rock, TX 78665 | 1 | Ĺ | | |
| 8 | | upation / Job title (See Instructions) | 9 Employer (See Instructions | | | |
| | Education C | | Chris Fancher Consultin | ng ∟ | | |
| | Date | |) | | Amount of Contribution (\$) | |
| | 06/27/2025 | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
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| | | Domfrot Contor CT 06250 | | | | |
| | Principal occu | Pomfret Center, CT 06259 upation / Job title (See Instructions) | Employer (See Instructions | <u>)</u> | | |
| | Sales | | Tradesmen Internationa | | | |
| <u> </u> | | | | 1 | tt -f Oentrikution (Φ) | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | ቀንደብ በበ |
| | 06/25/2025 | Farnsworth, Gene | | | | \$250.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Dallas, TX 75219 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | | |
| | Researcher | | IRMI | -, | | |
| | Date | Full name of contributor Out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) | |
| | 06/30/2025 | Farooque, Rabeeta | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Springfield, VA 22150 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | ed | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/29/2025 | Farra, Ghassan | | | | \$12.50 |
| | | Contributor address; City; State; Zip Code | | · | | |
| | | | | | | |
| | | | | | | |
| | | Garland, TX 75044 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Real estate a | agent | Ebby Halliday | | | |
| | | | <u> </u> | | | |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 63/228 Rpt: 66/272 | |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Talarico, Jar | mes (The Honorable) | | | 00081913 | - |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Fausto, Robert | | | | \$25.00 |
| | l | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Chandler, AZ 85225 | | | | |
| 8 | | upation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Gas Turbine | Engineer | Siemens Energy | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/25/2025 | Feissner, Nancy | | | | \$5.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Beltsville, MD 20705 | | | | |
| Γ | | ipation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | ed | Not Employed | | | |
| F | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/26/2025 | Ferguson, Samuel | | | | \$5.00 |
| | 1 | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Liberty, NY 12754 | | L | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Advisor | | World Relief | | | |
| Γ | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/27/2025 | Ferrara, Tony | | | | \$25.00 |
| | I | Contributor address; City; State; Zip Code | , | 1 | | |
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| L | | Brooksville, ME 04617 | | | | |
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| L | Not Employe | ed | Not Employed | | | |
| Γ | Date | Full name of contributor out-of-state PAC (ID#: |) | Ī | Amount of Contribution (\$) | |
| | 06/28/2025 | Ferris, Lori | | | | \$25.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
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| L | | Round Rock, TX 78664 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | | | |
| | Accountant | | Culhane Premier Proper | rtie | S | |
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| | The Instru | ction Guide explains how to complet | ete this fo | orm. | 1 | Total pages Schedule A1: Sch: 64/228 Rpt: 67/272 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Talarico, Jar | nes (The Honorable) | | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state | PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| | 06/29/2025 | Finch, Sandra | | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | | |
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| | | Round Rock, TX 78664 | r | | | | |
| 8 | | pation / Job title (See Instructions) | | 9 Employer (See Instructions | 5) | | |
| | Accountant | | | Self | - | | |
| | Date | | |) | | Amount of Contribution (\$) | |
| | 06/26/2025 | Fitzgerald, Nicki | | | | | \$37.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
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| | | Amarillo, TX 79109 | | | | | |
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| | | Cedar Park, TX 78613 | | | | | |
| | • | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Not Employe | ;d | | Not Employed | | | |
| | Date | Full name of contributor out-of-state | • PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Flener, Samara | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
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| | <u> </u> | Austin, TX 78723 | | | Ĺ | | |
| | Welding inst | pation / Job title (See Instructions) | | Employer (See Instructions TSTC | 5) | | |
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| | Date | Full name of contributor out-of-state | • PAC (ID#: |) | | Amount of Contribution (\$) | #05.00 |
| | 06/30/2025 | Flores, Anthony | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
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| | | El Paso, TX 79924 | | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| | Teacher | | | Ysleta Independent Sch | | District | |
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| Talarico, James (Th | e Honorable) | | 00081913 |
| | name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/30/2025 Flor | res, Daniel | | \$3.00 |
| 6 Con | tributor address; City; State; Zip Code | | |
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| Lea | under, TX 78641 | | |
| 8 Principal occupation / | Job title (See Instructions) | 9 Employer (See Instructions) | |
| Account Executive | | uShip | |
| Date Full | name of contributor out-of-state PAC (ID#: | | Amount of Contribution (\$) |
| 06/30/2025 Floi | res, Jacqueline | | \$50.00 |
| Con | tributor address; City; State; Zip Code | | |
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| Bro | oklyn, NY 11201 | | |
| Principal occupation / | Job title (See Instructions) | Employer (See Instructions) | |
| Project Manager | | General Contractor | |
| Date Full | name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 Flor | res, Ramiro | | \$25.00 |
| Con | tributor address; City; State; Zip Code | | |
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| | und Rock, TX 78665 | | |
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| 06/28/2025 Flyr | nn, Kaitlyn | | \$50.00 |
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| | stin, TX 78717 | | |
| | Job title (See Instructions) | Employer (See Instructions) | 5) |
| Management | | ResumeSpice | |
| | name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | ger, Katherine | | \$25.00 |
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| | nta Cruz, CA 95060 | | 、 、 |
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| 06/30/2025 | Fondry, Janell | | \$2 | 25.00 |
| | 6 Contributor address; City; State; Zip Code | | | |
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| | Austin, TX 78723 | | | |
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| 06/28/2025 | Fox, Michelle |) | | 5.00 |
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| 06/29/2025 | Fox, Michelle | | | 5.00 |
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| | ipation / Job title (See Instructions) | Employer (See Instructions |) | |
| Not Employe | | Not Employed | | |
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| 06/23/2025 | Francis, James | | \$5 | 50.00 |
| | Contributor address; City; State; Zip Code | | | |
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| The Instruction Guide explains how to complete this form. 1 Trail rapes Schedula A1: Sch: 67/228 Ppt: 70/272 2 FILER NAME Talarco, James (The Honorable) 9 Fiel (This Commission Files) 00081913 4 Date 06/27/2025 5 Finances (The Honorable) 7 Amount of Contributor Francis, James 7 Amount of Contributor (S) Francis, James 6 Contributor address; City, State: Zip Code Carroliton, TX 75010 9 Employer (See Instructions) Retired 7 Amount of Contribution (S) States City 7 Austin, TX 75731 Principal occupation / Job title (Sie Instructions) Global Director Employer (See Instructions) Salesforce Amount of Contribution (S) States City 06/22/2025 Function address; City, State; Zip Code Austin, TX 78731 Employer (See Instructions) Salesforce Amount of Contribution (S) States City 06/22/2025 Function address; City; State; Zip Code Austin, TX 78731 Employer (See Instructions) Salesforce Amount of Contribution (S) States City 06/22/2025 Function address; City; State; Zip Code Austin, TX 78731 Employer (See Instructions) Salesforce Amount of Contribution (S) States City 06/29/2025 Function of Contributor Contributor address; City; State; Zip Code Austin, TX 78731 Amount of Contribution (S) States City \$25.00 Date Of/29/2025 Function of Contributor France, ReseAnne Contributor address; City; State; Zip Code Austin, TX 78731 Amount of Contribution | | | | | | | |
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| Austin, TX 78731 Principal occupation / Job title (See Instructions) Employer (See Instructions) | 06/30/2025 | Franco, RoseAnne | | | | | \$25.00 |
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| The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 68/228 Rpt: 71/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | nes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) |
| 06/28/2025 | Frandsen, Barbara | | \$25.00 |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| | Austin, TX 78749 | | |
| 8 Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | <u></u> |
| Not Employe | | Not Employed |) |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/26/2025 | Fraser, Colin | | \$10.00 |
| | Contributor address; City; State; Zip Code | | |
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| | Duluth, GA 30097 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) |
| Insurance | | Starr | |
| Date | Full name of contributor out-of-state PAC (ID#: | ·) | Amount of Contribution (\$) |
| 06/24/2025 | Freeman, Brian | | \$50.00 |
| | Contributor address; City; State; Zip Code | | |
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| | | | |
| | Cambridge, MA 02138 | | |
| | pation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Researcher | | Abt Global | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/29/2025 | Friedman, David | | \$20.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Austin, TX 78759 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) |
| engineer | | self | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/23/2025 | Frink, Cheryl |) | \$25.00 |
| 00/20/2020 | Contributor address; City; State; Zip Code | | |
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| | | | |
| | Austin, TX 78750 | | |
| Principal occu | I pation / Job title (See Instructions) | Employer (See Instructions | s) |
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| The Instru | ction Guide explains how to complete this f | iorm. | 1 Total pages Schedule A1: Sch: 69/228 Rpt: 72/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) |
| 06/30/2025 | Frost, Edmund | | \$100.0 |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| | Houston, TX 77074 | | |
| 8 Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | ۲ ۵) |
| Not Employe | be | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/29/2025 | Fulton, Susan | | \$25.0 |
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| | Austin, TX 78731 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Project man | ager | UT Austin | |
| Date | Full name of contributor out-of-state PAC (ID#: | <u> </u> | Amount of Contribution (\$) |
| 06/30/2025 | Gagnon, Tyler | | \$25.0 |
| | Contributor address; City; State; Zip Code | | |
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| | | | |
| | Beverly, MA 01915 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | ;) |
| Corporate C | communications | Kiniksa | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/29/2025 | Galloway, Richard | | \$50.0 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Cedar Park, TX 78613 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> |
| Not Employe | | Not Employed | ·) |
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| Date 06/23/2025 | Full name of contributor out-of-state PAC (ID#: Galloway, Richard |) | Amount of Contribution (\$) \$50.0 |
| 00/23/2023 | - | | φου.ς |
| | Contributor address; City; State; Zip Code | | |
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| | Cedar Park, TX 78613 | | |
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| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1: Sch: 70/228 Rpt: 73/272 |
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| 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Talarico, James (The Honorable) | 00081913 |
| 4 Date 5 Full name of contributor out-of-state PAC (ID#:) | 7 Amount of Contribution (\$) |
| 06/30/2025 Gann, Brandy | \$25.00 |
| 6 Contributor address; City; State; Zip Code | |
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| | |
| Austin, TX 78704 | |
| 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) | s) |
| Attorney Travis County | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/30/2025 Garcia, Andrea | \$25.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Houston, TX 77008 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | S) |
| PM Oracle | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/30/2025 Garcia, Gabe | \$10.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Santa Margarita, CA 93453 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions | s) |
| Not employed Not employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/26/2025 Garcia, Jeannette | \$100.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| San Antonio, TX 78244 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | s) |
| Communications Director UP Partnership | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/30/2025 Garcia, Victor | \$5.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Jacksonville, FL 32258 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
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| Not Employed Not Employed | s) |

| The Instr | ruction Guide explains how to complete this | form. | 1 Total pages Schedule A1: Sch: 71/228 Rpt: 74/272 | |
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| 2 FILER NAM | lE | | 3 Filer ID (Ethics Commission Filers) | 3) |
| | ames (The Honorable) | | 00081913 | , |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: | :) | 7 Amount of Contribution (\$) | |
| 06/28/202 | | | \$50 | 0.00 |
| | 6 Contributor address; City; State; Zip Code | | | |
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| | Leander, TX 78641 | | | |
| | cupation / Job title (See Instructions) | 9 Employer (See Instructions) |) | |
| Education | | Leander | | |
| Date | Full name of contributor out-of-state PAC (ID#: | :) | Amount of Contribution (\$) | |
| 06/30/202 | | | \$20 | 0.00 |
| | Contributor address; City; State; Zip Code | | | |
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| | Austin, TX 78757 | | | |
| - | cupation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Physician | | Texas | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/25/202 | | | \$25 | 5.00 |
| | Contributor address; City; State; Zip Code | | | |
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| | Houston, TX 77042 | | | |
| - | cupation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Executive | Director | KPMG | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/23/202 | 5 Garvin, Frances | | \$25 | 5.00 |
| | Contributor address; City; State; Zip Code | | | |
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| | | | | |
| | Fort Worth, TX 76244 | | | |
| | cupation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Not Emplo | yed | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/30/202 | 5 Garza, Cherisse | | \$20 | 0.00 |
| | Contributor address; City; State; Zip Code | | | |
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| | San Antonio, TX 78249 | | | |
| | cupation / Job title (See Instructions) | Employer (See Instructions) |) | |
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| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
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| 4 | Date | 5 Full name of contributor 🗌 out- | t-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Garza, Evalyn | | | | | \$25.00 |
| | I | 6 Contributor address; City; State; Zip | | | 1 | | |
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| Ļ | | Austin, TX 78729 | | • Englisher (Case Instructions | Ĺ | | |
| 8 | Principal occu Clerk | pation / Job title (See Instructions) | | 9 Employer (See Instructions IRS | 5) | | |
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| | Date | | -of-state PAC (ID#: |) | | Amount of Contribution (\$) | ±15.00 |
| | 06/26/2025 Gash, Katherine | | | | | \$15.00 | |
| | | Contributor address; City; State; Zip |) Code | | | | |
| | | | | | | | |
| | | Charleston, SC 29407 | | | | | |
| ┝ | Drincinal occu | Ipation / Job title (See Instructions) | ı | Employer (See Instructions | <u> </u> | | |
| | Customer Su | | | Blackbaud | 5) | | |
| ╞ | | | | | . | Amount of Contribution (¢) | |
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| | 00/30/2025 | | | | | | Φ20.00 |
| | Contributor address; City; State; Zip Code | | | | | | |
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| | | San Antonio, TX 78258 | | | | | |
| ⊢ | Principal occupation / Job title (See Instructions) Employer (See Instructions) | | | 5) | | | |
| | Not Employe | be | | Not Employed | | | |
| ╞ | Date | Full name of contributor | t-of-state PAC (ID#: |) | Ι | Amount of Contribution (\$) | |
| | 06/28/2025 | Gaventa, Sarah | | | | • • | \$50.00 |
| | I | | | | ł | | |
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| | | | | | | | |
| | | Austin, TX 78723 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | | | |
| | Dean of Stud | Jents | | Austin Presbyterian The | eolo | gical Seminary | |
| | Date | Full name of contributor | t-of-state PAC (ID#: |) | Ī | Amount of Contribution (\$) | |
| | 06/27/2025 | Gerson, Richard | | | | | \$25.00 |
| | Contributor address; City; State; Zip Code | | 1 | | | | |
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| | | Richmond, TX 77469 | , | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Maintenance | <u>}</u> | | Garza Mgmt Corp | | | |
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| 4 [| Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| (| 06/30/2025 | Geyer, Ginger | | | | \$100.00 |
| | I | 6 Contributor address; City; State; Zip Code | | 1 | | |
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| | | Austin, TX 78731 | | | | |
| | | pation / Job title (See Instructions) | 9 Employer (See Instructions) | 5) | | |
| I | Not Employe | | Not Employed | - | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | / | Amount of Contribution (\$) | |
| (| 06/30/2025 | Gibson, Rachel | | | | \$25.00 |
| | I | Contributor address; City; State; Zip Code | |] | | |
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| | I | Divisi Deele TV 20004 | | | | |
| <u> </u> | D in sin al a any | Round Rock, TX 78664 | | Ĺ | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Veterinary T | | My Pets MVP | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | / | Amount of Contribution (\$) | |
| (| 06/30/2025 | Gilberg, Catherine | |] | | \$25.00 |
| | I | Contributor address; City; State; Zip Code | | | | |
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| | I | Dallas, TX 75230 | | | | |
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| | 06/30/2025 | Giles, LeighAnne | | | | \$50.00 |
| | I | Contributor address; City; State; Zip Code | | | | |
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| | I | Ormond Beach, FL 32174 | | | | |
| F | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | | |
| | Not Employe | | Not Employed | ., | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | |
| | 06/28/2025 | Gilley, Katie | / | ['] | | \$17.76 |
| | 0,20,2022 | Contributor address; City; State; Zip Code | | ł | | ₩± |
| | I | Culturbutor address, City, State, Lip Couc | | | | |
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| | I | Friona, TX 79035 | | | | |
| F | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Educator | | Friona ISD | | | |
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| The Instruction Guide explains how to complete this form. 1 Trait pages Schedule A1: Sch: 74/228 Rpt: 77/272 2 FLIER NAME 3 Fiel (Efficiency) Seh: 74/228 Rpt: 77/272 2 FLIER NAME 3 Fiel (Efficiency) 00081913 4 Date 6 Contributor address: City, State: Zip Code 7 Amount of Contribution (S) 6 Contributor address: City, State: Zip Code 7 Amount of Contribution (S) \$50.00 8 Funcpal accupation / Job tife (See Instructions) 9 Employer (See Instructions) Amount of Contribution (S) 06/25/2025 Full name of contributor out-of-state PAC (DD: | | | | | | | | |
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| Talarico, James (The Honorable) 00081913 4 Date 5 Full name of contributor induces: City: State; Zip Code 7 Amount of Contribution (\$) 6 Contributor address; City: State; Zip Code 9 Employer (See Instructions) 7 Amount of Contribution (\$) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) 6 Contributor address; City: State; Zip Code 000725/2025 Amount of Contribution (\$) \$ \$25.00 7 Principal occupation / Job title (See Instructions) 0 Contributor address; City: State; Zip Code Amount of Contribution (\$) \$ \$25.00 9 Principal occupation / Job title (See Instructions) Consultant Amount of Contribution (\$) \$ \$25.00 06/25/2025 Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | The | Instru | ction Guide explains how | v to complete this f | orm. | 1 | | |
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| 6 Contributor address: City; State; Zip Code Lawrence, KS 66049 Principal occupation / Job title (See Instructions) NA 8 Principal occupation / Job title (See Instructions) NA Date Gel/25/2025 Gilmore, Pete | 4 Date | | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| 6 Contributor address; City; State; Zip Code Retired Lawrence, KS 66049 8 Principal occupation / Job title (See Instructions) NA NA Date Gilmore, Pete 06/25/2025 Gilmore, Pete Contributor address; City; State; Zip Code Amount of Contribution (S) Principal occupation / Job title (See Instructions) Employer (See Instructions) Industrial Hygienist Consultant Date Giron, Victoria E Giron, Victoria E Contributor address; City; State: 2ip Code Sugar Land, TX 77478 Amount of Contribution (S) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self employed Full name of contributor out-of-state PAC (ID): O6/30/2025 Givens, Emily State: 2ip Code 06/30/2025 Givens, Emily Mnount of Contribution (S) Self employed Contributor address; City; State: 2ip Code Amount of Contribution (S) 06/30/2025 Givens, Emily Amount of Contribution (S) Giron, Xi Case Employer (See Instructions) \$25.00 Contributor address; City; State: 2ip Code Amount of Contribution (S | 06/30 | 0/2025 | | | | | | \$50.00 |
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| 06/30/2025 Giron, Victoria E \$\$0.00 Contributor address; City; State; Zip Code \$\$0.00 Sugar Land, TX 77478 Employer (See Instructions) Victoria Giron Victoria Giron Date Full name of contributor out-of-state PAC (ID#; | | | | , | | , | | |
| 06/30/2025 Giron, Victoria E \$\$0.00 Contributor address; City; State; Zip Code \$\$0.00 Sugar Land, TX 77478 Employer (See Instructions) Victoria Giron Victoria Giron Date Full name of contributor out-of-state PAC (ID#; | Date | | Full name of contributor | out-of-state PAC (ID#: |) | Т | Amount of Contribution (\$) | |
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| Self employed Victoria Giron Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/30/2025 Givens, Emily \$25.00 Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code \$25.00 Austin, TX 78727 Employer (See Instructions) Employer (See Instructions) Director Full name of contributor out-of-state PAC (ID#:) Amount of Contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/30/2025 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/30/2025 Gloria, Marlowe | | | Sugar Land, TX 77478 | | | | | |
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| Contributor address; City; State; Zip Code Austin, TX 78727 Principal occupation / Job title (See Instructions) Director Date Full name of contributor | Date | | Full name of contributor | out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
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| Contributor address; City; State; Zip Code Salem, OR 97302 Principal occupation / Job title (See Instructions) Employer (See Instructions) | | 0/2025 | | |) | | | \$100 00 |
| Salem, OR 97302 Principal occupation / Job title (See Instructions) Employer (See Instructions) | 00/00 | 012025 | | | | | | Φ100.00 |
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| | | | Salem, OR 97302 | | | | | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 Date 06/27/2025 | 5 Full name of contributor out-of-state PAC (ID#: Goddin, Hoppy |) | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code | | |
| | Austin, TX 78704 | | |
| 8 Principal occu Not Employe | | 9 Employer (See Instructions Not Employed |) |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/27/2025 | Goldin, Edward | | \$50.00 |
| | Contributor address; City; State; Zip Code | | |
| | Armonk, NY 10504 | | <u> </u> |
| - | upation / Job title (See Instructions) | Employer (See Instructions) Prosthodontic Associate | |
| Dentist | <u> </u> | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Goldrick, Cynthia Contributor address; City; State; Zip Code | | \$150.00 |
| Principal occu | West Lake Hills, TX 78746 upation / Job title (See Instructions) | Employer (See Instructions) | s) |
| Realtor | | Moreland properties | , |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/23/2025 | Gonin, Paul | | \$50.00 |
| | Contributor address; City; State; Zip Code | | |
| | Georgetown, TX 78633 | | |
| Principal occu Not Employe | upation / Job title (See Instructions) ed | Employer (See Instructions) Not Employed |) |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Gonzalez, Allen | | \$50.00 |
| | Contributor address; City; State; Zip Code | | |
| l | Austin, TX 78727 | | |
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| 2 FILER NAME | | | | 3 F | Filer ID (Ethics Commission | Filers) |
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| 4 Date | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 A | Amount of Contribution (\$) | |
| 06/30/2025 | Gonzalez, Gordon | | | | | \$10.00 |
| | 6 Contributor address; City; State | e; Zip Code | | 1 | | |
| | | | | | | |
| | Texas City, TX 77591 | | | | | |
| 8 Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instructions | s) | | |
| Not Employe | d | | Not Employed | | | |
| Date | Full name of contributor | out-of-state PAC (ID#: |) | A | Amount of Contribution (\$) | |
| 06/29/2025 | Gonzalez, Gordon | - | | | | \$50.00 |
| | Contributor address; City; State | | | | | |
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| | Texas City, TX 77591 | | | | | |
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| 06/30/2025 | Gonzalez, Ileana | | / | <i>'</i> | | \$31.19 |
| 00/00/2020 | | | | | | ΨΟΤ.ΤΟ |
| 1 | Contributor address; City; State | e; Zip Coue | | | | |
| | | | | | | |
| | Austin, TX 78749 | | | | | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | ol Dual Language Social Studie | es Teacher | Austin ISD | " | | |
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| 06/30/2025 | | | | | | \$5.00 |
| | Contributor address; City; State | e; Zip Code | | | | |
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| | Houston, TX 77049 | | | | | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u>ا</u> | | |
| Banker | | | Shell FCU | <i>''</i> | | |
| | | 7 | | , , | A contribution (\$) | |
| Date | | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | Ф <u>Э</u> Е ОО |
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| Talarico, James (The Honorable) 00081913 | | | | |
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| Talarico, James (The Honorable) 00081913 4 Date OB/30/2025 5 Full name of contributor | The Instru | ction Guide explains how to complete this | form. | |
| Talarico, James (The Honorable) 00081913 4 Date OB/30/2025 5 Full name of contributor | 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| 06/30/2025 Gonzalez, Maribel \$25.00 6 Contributor address; City; State; Zip Code \$25.00 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date Goodfellow, Catityn 0u-of-state PAC (DP Amount of Contribution (\$) 06/30/2025 Goodfellow, Catityn S50.00 Contributor address; City; State; Zip Code Leander, TX 78641 Principal occupation / Job title (See Instructions) Teacher Employer (See Instructions) Leander ISD Date Gordon, Lori out-of-state PAC (DP 06/30/2025 Full name of contributor out-of-state PAC (DP Contributor address; City; State; Zip Code Amount of Contribution (\$) \$50.00 Date Gordon, Lori Contributor address; City; State; Zip Code Amount of Contribution (\$) \$50.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Evereve Sto.00 O6/26/2025 Gordon, Lori contributor address; City; State; Zip Code Amount of Contribution (\$) \$10.00 O6/26/2025 Gore, Laura Employer (See Instructions) Ferred Sto.00 Sto.00 Odi/26/20 | Talarico, Jar | nes (The Honorable) | | |
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| | The Instru | ction Guide explains how to complete this f | form. | 1 | Total pages Schedule A1: Sch: 78/228 Rpt: 81/272 | |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | | mes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Goyette, Amy | | | | \$100.00 |
| | 1 | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Round Rock, TX 78664 | | | | |
| 8 | Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | <u> </u> | | |
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| | 06/30/2025 | Graber, Loel |) | | Amount of Contribution (\$) | \$50.00 |
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| | | Contributor address; City; State; Zip Code | | | | |
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| | | Austin, TX 78759 | | | | |
| ⊢ | Principal occu | Ipation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Not Employe | | Not Employed | -, | | |
| ╞ | Date | |) | Τ | Amount of Contribution (\$) | |
| | 06/23/2025 | Graef, Janis | / | | Allount of Contribution (+) | \$25.00 |
| | Contributor address; City; State; Zip Code | | | | | T----- |
| | Contributor address, City, State, Zip Code | | | | | |
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| | | Austin, TX 78746 | | | | |
| | Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | €d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ | ·) | | Amount of Contribution (\$) | |
| | 06/28/2025 | Graf, Mary | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
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| | | Austin, TX 78728 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | ;d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| | 06/28/2025 | Grantham, Amanda | | | | \$50.00 |
| | Contributor address; City; State; Zip Code | | 1 | | | |
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| | | Austin, TX 78754 | 1 | | | |
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| | Analyst | | TX State Agency | | | |
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| | The Instru | ction Guide explains how to complete this f | iorm. | 1 Total pages Schedule A1: Sch: 79/228 Rpt: 82/272 |
| 2 | FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | | mes (The Honorable) | | 00081913 |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) |
| | 06/29/2025 | Graves, Sandra | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 |
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| | | El Reno, OK 73036 | | |
| 8 | Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | s) |
| | Home Health | h CEO | All The Little Things Cou | unt |
| | Date | Full name of contributor Out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/25/2025 | Graves, Sandra | | \$100.00 |
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| | Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| | 06/30/2025 | Gray, Mary | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | 1 |
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| | | Round Rock, TX 78665 | | |
| Γ | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| | Supervisor | | A+FCU | |
| ╞ | Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| | 06/26/2025 | Grayson, Melinda | | \$100.00 |
| | Contributor address; City; State; Zip Code | | 4 | |
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| | | | | |
| | | Round Rock, TX 78664 | | |
| ⊢ | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | ls) |
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| The Instruction Guide explains how to complete this form. Sch: 2 FILER NAME Talarico, James (The Honorable) 3 Filer 1 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amou 6 Contributor address; City; State; Zip Code 7 Amou 8 Principal occupation / Job title (See Instructions) Psychotherapist 9 Employer (See Instructions) Self 9 Date Full name of contributor out-of-state PAC (ID#:) Amou Amou 06/30/2025 Greenleaf, Samantha Amou 06/30/2025 Full name of contributor out-of-state PAC (ID#: | ages Schedule A1: 30/228 Rpt: 83/272 D (Ethics Commission Filers) L913 Int of Contribution (\$) \$25.00 |
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| Talarico, James (The Honorable) 0008 4 Date 5 Full name of contributor out-of-state PAC (ID#: | L913 nt of Contribution (\$) \$25.00 |
| Talarico, James (The Honorable) 0008 4 Date 5 Full name of contributor out-of-state PAC (ID#: | L913 ht of Contribution (\$) \$25.00 ht of Contribution (\$) |
| 06/30/2025 Green, Carolyn 6 Contributor address; City; State; Zip Code Albuquerque, NM 87111 9 8 Principal occupation / Job title (See Instructions) Psychotherapist 9 Employer (See Instructions) Self Date Full name of contributor out-of-state PAC (ID#: | \$25.00 |
| 6 Contributor address; City; State; Zip Code Albuquerque, NM 87111 Albuquerque, NM 87111 8 Principal occupation / Job title (See Instructions) Psychotherapist 9 Employer (See Instructions) Self Date Full name of contributor out-of-state PAC (ID#:) Amou 06/30/2025 Greenleaf, Samantha Contributor address; City; State; Zip Code Amou 06/30/2025 Greenleaf, Samantha Contributor address; City; State; Zip Code Amou Austin, TX 78757 Employer (See Instructions) Austin ISD Employer (See Instructions) Assistant Principal Amou Date Full name of contributor out-of-state PAC (ID#: | nt of Contribution (\$) |
| 6 Contributor address; City; State; Zip Code Albuquerque, NM 87111 9 8 Principal occupation / Job title (See Instructions) Psychotherapist 9 Employer (See Instructions) Self Date Full name of contributor out-of-state PAC (ID#:) Amou 06/30/2025 Greenleaf, Samantha Contributor address; City; State; Zip Code Amou Austin, TX 78757 Austin, TX 78757 Principal occupation / Job title (See Instructions) Austin ISD Employer (See Instructions) Assistant Principal Date Full name of contributor out-of-state PAC (ID#:) Amou 06/26/2025 Grey, Mike | |
| 8 Principal occupation / Job title (See Instructions) Psychotherapist 9 Employer (See Instructions) Self Date Full name of contributor out-of-state PAC (ID#:) Amou 06/30/2025 Greenleaf, Samantha Contributor address; City; State; Zip Code Amou Austin, TX 78757 Principal occupation / Job title (See Instructions) Austin ISD Employer (See Instructions) Assistant Principal Amou Date Full name of contributor out-of-state PAC (ID#:) Amou 06/26/2025 Grey, Mike Contributor address; City; State; Zip Code Amou Date Full name of contributor out-of-state PAC (ID#:) Amou 06/26/2025 Grey, Mike Contributor address; City; State; Zip Code Amou Principal occupation / Job title (See Instructions) Priest/Professor Employer (See Instructions) Congregation Of the Holy Spirit Amou Date Full name of contributor out-of-state PAC (ID#:) Amou Amou 06/25/2025 Griego, Allan out-of-state PAC (ID#:) Amou | |
| 8 Principal occupation / Job title (See Instructions) Psychotherapist 9 Employer (See Instructions) Self Date Full name of contributor out-of-state PAC (ID#:) Amou 06/30/2025 Greenleaf, Samantha Contributor address; City; State; Zip Code Amou Austin, TX 78757 Austin, TX 78757 Employer (See Instructions) Austin ISD Employer (See Instructions) Assistant Principal Date Full name of contributor out-of-state PAC (ID#:) Amou 06/26/2025 Grey, Mike Contributor address; City; State; Zip Code Amou Date Full name of contributor out-of-state PAC (ID#:) Amou 06/26/2025 Grey, Mike Contributor address; City; State; Zip Code Amou Principal occupation / Job title (See Instructions) Priest/Professor Employer (See Instructions) Congregation Of the Holy Spirit Date Full name of contributor out-of-state PAC (ID#:) Amou 06/25/2025 Full name of contributor out-of-state PAC (ID#:) Amou 06/25/2025 Griego, Allan out-of-state PAC (ID#:) Amou | |
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| 06/30/2025 Greenleaf, Samantha Contributor address; City; State; Zip Code Austin, TX 78757 Principal occupation / Job title (See Instructions) Austin ISD Date Full name of contributor 06/26/2025 Grey, Mike Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Prinest/Professor Date Full name of contributor Out-of-state PAC (ID#: Congregation Of the Holy Spirit Date Full name of contributor Out-of-state PAC (ID#: Of/25/2025 Griego, Allan | |
| 06/30/2025 Greenleaf, Samantha Contributor address; City; State; Zip Code Austin, TX 78757 Principal occupation / Job title (See Instructions) Austin ISD Date Full name of contributor 06/26/2025 Grey, Mike Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Prinest/Professor Date Full name of contributor Out-of-state PAC (ID#: Congregation Of the Holy Spirit Date Full name of contributor Out-of-state PAC (ID#: Of/25/2025 Griego, Allan | \$25.00 |
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| Austin ISD Assistant Principal Date Full name of contributor out-of-state PAC (ID#:) Amou 06/26/2025 Grey, Mike Contributor address; City; State; Zip Code Amou Houston, TX 77098 Houston, TX 77098 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amou Date Full name of contributor out-of-state PAC (ID#:) Amou 06/25/2025 Griego, Allan Amou Amou | |
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| 06/26/2025 Grey, Mike Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Priest/Professor Date Full name of contributor 06/25/2025 Griego, Allan | |
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| Houston, TX 77098 Principal occupation / Job title (See Instructions) Priest/Professor Date Full name of contributor 06/25/2025 Griego, Allan | • - |
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| 06/25/2025 Griego, Allan | |
| 06/25/2025 Griego, Allan | nt of Contribution (\$) |
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| Austin, TX 78732 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| Real Estate Broker Allan Griego | |
| Date Full name of contributor out-of-state PAC (ID#:) Amou | nt of Contribution (\$) |
| 06/30/2025 Griego, Carlos | \$50.00 |
| Contributor address; City; State; Zip Code | |
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| Austin, TX 78732 | |
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| | The Instru | ction Guide explains how to complete t | this form | n. | - | Sch: 81/228 Rpt: 84/272 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Talarico, Jar | mes (The Honorable) | | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC | C (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/26/2025 | Griffith, Clark | | | | | \$50.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | | |
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| <u> </u> | | Austin, TX 78727 | | | | | |
| 8 | | upation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | hydrogeolog | ist | | INTERA Inc. | | | |
| | Date | | C (ID#: |) | | Amount of Contribution (\$) | |
| | 06/29/2025 | Grigsby, Mary | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
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| | | | | | | | |
| | - · · · | Austin, TX 78753 | | | | | |
| | | upation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Not Employe | | | Not Employed | | | |
| | Date | | C (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Griswold, Kelly | | | | | \$50.00 |
| | Contributor address; City; State; Zip Code | | | | | | |
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| | | Austin TV 79791 | | | | | |
| | Dringing oog | Austin, TX 78731 | <u> </u> | Employer (Coo Instructions) | | | |
| | Not Employe | upation / Job title (See Instructions) | | Employer (See Instructions) Not Employed |) | | |
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| | Date | | C (ID#: |) | | Amount of Contribution (\$) | <u> </u> |
| | 06/24/2025 | Guajardo, Javier | | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | Austin, TX 78727 | | | | | |
| | Principal occu | upation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | software eng | | | Alkira | , | | |
| ⊨ | _ | - | |) | | Amount of Contribution (\$) | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC Guerra, Amada | C (ID#: |) | | Amount of Contribution (\$) | \$25.00 |
| | 00/00/2020 | | | | | | Ψ20.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
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| | | San Antonio, TX 78210 | | | | | |
| _ | Principal occu | upation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | | ess Accountant | | Carle Foundation Hospit | | | |
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| | The Instru | ction Guide explains how to complete this fo | orm. | | Total pages Schedule A1: Sch: 82/228 Rpt: 85/272 | |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commissio | n Filers) |
| | Talarico, Jar | nes (The Honorable) | | | 00081913 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Gunter, Jan | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | |
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| | | | | | | |
| | | Austin, TX 78717 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Real Estate | Agent | Keller Williams | | | |
| F | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/26/2025 | H Williams, Glenn | | | | \$10.00 |
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| | | | | | | |
| | | Austin, TX 78729 | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Not Employe | ed | Not Employed | | | |
| ⊨ | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Hailey, Jay |) | | | \$1,000.00 |
| | 00,00,2020 | Contributor address; City; State; Zip Code | | | | +_,000100 |
| | | Contributor address, City, State, Zip Code | | | | |
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| | | Austin, TX 78731 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Not Employe | ed | Not Employed | | | |
| ⊨ | Date | Full name of contributor Out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/28/2025 | Haines, Randall |) | | | \$21.00 |
| | 00/20/2020 | Contributor address; City; State; Zip Code | | | | <i>41100</i> |
| | | Contributor address, City, State, Zip Code | | | | |
| | | | | | | |
| | | Austin, TX 78750 | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Not Employe | | Not Employed | , | | |
| ⊨ | Date | Full name of contributor out-of-state PAC (ID#: |) | Г | Amount of Contribution (\$) | |
| | 06/30/2025 | Hakim, Samantha | | | | \$25.00 |
| | 00/00/2020 | | | | | φ20.00 |
| | | Contributor address; City; State; Zip Code | | | | |
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| | | Encino, CA 91436 | | | | |
| ⊢ | Princinal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Teacher | | Freelance | -) | | |
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| | The Instru | ction Guide explains how to complete this f | form. | 1 Total pages Schedule A1: Sch: 83/228 Rpt: 86/272 |
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| 2 | FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | | mes (The Honorable) | | 00081913 |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) |
| | 06/30/2025 | Hale, Valerie | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 |
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| | | Midland, TX 79707 | | |
| 8 | Drincinal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | >\ |
| | Not Employe | | Not Employed | <i>»</i> / |
| ⊨ | Date | |) | Amount of Contribution (\$) |
| | 06/30/2025 | Hall, Anna |) | \$25.00 |
| | 00/00/2020 | | | |
| | | Contributor address, Oity, State, 21p Sous | | |
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| | | Austin, TX 78704 | | |
| | Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | s) |
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| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/30/2025 | Hall, Chad | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | 1 |
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| | | Pearsall, TX 78061 | | |
| _ | Drincinal occu | upation / Job title (See Instructions) | Employer (See Instructions | >\ |
| | Not Employe | | Not Employed | <i>"</i> |
| ╞ | Date | |) | Amount of Contribution (\$) |
| | 06/28/2025 | Hall, Nancy | / | \$100.00 |
| | - | Contributor address; City; State; Zip Code | | |
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| | | Austin, TX 78752 | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | 3) |
| | Not Employe |)d | Not Employed | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/25/2025 | Halpin, Beki | | \$35.00 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | Pflugerville, TX 78660 | | |
| ┝ | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u></u> |
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| 2 | FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| | 06/24/2025 | Halverson, Kristopher | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | · |
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| _ | | Mcallen, TX 78504 | 1 <u>-</u> , /2 kratnation | |
| 8 | | upation / Job title (See Instructions) | 9 Employer (See Instructions) | s) |
| | Not Employe | | Not Employed | · |
| | Date | |) | Amount of Contribution (\$) |
| | 06/25/2025 | Hamel, Deborah | | \$15.00 |
| | | Contributor address; City; State; Zip Code | | |
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| | | Washington, DC 20008 | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | 2) |
| | Not Employe | | Not Employed | 5) |
| | | | | Amount of Contribution (\$) |
| | Date 06/29/2025 | Full name of contributor out-of-state PAC (ID#: Hamilton, Joyce |) | Amount of Contribution (\$) \$50.00 |
| | 0012312023 | | | ψου.ο. |
| | | Contributor address; City; State; Zip Code | | |
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| | | Harlingen, TX 78552 | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| | Not Employe | be | Not Employed | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/30/2025 | Hamilton, Kathy | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | |
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| | | | | |
| | | Plano, TX 75024 | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| | Not Employe | ;d | Not Employed | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/30/2025 | Hampton, Santa | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | |
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| | D i sizzi assi | San Antonio, TX 78248 | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | S) |
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| Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/28/2025 | Haney, Lesa | | \$50. |
| | 6 Contributor address; City; State; Zip Code | | |
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| | | | |
| | Dripping Springs, TX 78620 | | - |
| | upation / Job title (See Instructions) | 9 Employer (See Instructions) |) |
| Not Employe | | Not Employed | |
| Date | — |) | Amount of Contribution (\$) |
| 06/30/2025 | | | \$25. |
| | Contributor address; City; State; Zip Code | | |
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| | Coronado, CA 92118 | | |
| Drincinal occu | upation / Job title (See Instructions) | Employer (See Instructions) | |
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| Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#: Hardman, Mary |) | Amount of Contribution (\$) \$25. |
| 00/30/2023 | | | ¥20. |
| | Contributor address; City; State; Zip Code | | |
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| | Katy, TX 77449 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions) | ;) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/25/2025 | Harhai, Deborah | | \$10. |
| | Contributor address; City; State; Zip Code | | |
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| | San Antonio, TX 78250 | · · · · · · · · · · · · · · · · · · · | |
| - | upation / Job title (See Instructions) | Employer (See Instructions) |) |
| Not Employe | əd | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/23/2025 | Harper, Leslie | | \$25. |
| | Contributor address; City; State; Zip Code | | |
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| | Pflugerville, TX 78660 | | |
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| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) |
| | 06/28/2025 | Harrigan, Sue | | \$2.50 |
| | | 6 Contributor address; City; State; Zip Code | | |
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| Ļ | | Austin, TX 78703 | 1 | |
| 8 | | upation / Job title (See Instructions) | 9 Employer (See Instructions | 3) |
| | Not Employe | 3d | Not Employed | |
| | Date | |) | Amount of Contribution (\$) |
| | 06/29/2025 | Harrigan, Sue | | \$5.00 |
| | | Contributor address; City; State; Zip Code | | |
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| | | Austin, TX 78703 | 1 | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | 3) |
| | Not Employe | 3d | Not Employed | |
| | Date | |) | Amount of Contribution (\$) |
| | 06/30/2025 | Harrington, Jane | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | |
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| | | Katy, TX 77494 | | |
| | • | upation / Job title (See Instructions) | Employer (See Instructions | 5) |
| | Not Employe | | Not Employed | 1 |
| | Date | |) | Amount of Contribution (\$) |
| | 06/30/2025 | Harris, Diane | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | Southlake, TX 76092 | | |
| ┝ | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u></u> |
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| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/30/2025 | Harris, Erica | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | San Antonio, TX 78230 | | |
| ┝ | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u></u> |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Talarico, Jar | mes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Harris, Nancy | | | | \$5.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | |
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| Ļ | Dringing occu | Venus, TX 76084 | - Employer (See Instructions | <u> </u> | | |
| ð | Not Employe | upation / Job title (See Instructions) | 9 Employer (See Instructions Not Employed | S) | | |
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| | Date | |) | | Amount of Contribution (\$) | * 50.00 |
| | 06/29/2025 | | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Abilene, TX 79606 | | | | |
| ⊢ | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | | |
| | Physician | | Ped Associates | -, | | |
| ╞ | Date | Full name of contributor Out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Hatcher, Brent | / | | | \$5.00 |
| | - | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Georgetown, TX 78628 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe |)d | Not Employed | | | |
| | Date | |) | Γ | Amount of Contribution (\$) | |
| | 06/25/2025 | Hatfield, Jeff | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Irving, TX 75060 | | | | |
| ┝ | Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | <u>ا</u> | | |
| | Not Employe | | Not Employed | 3) | | |
| ╞ | Date | Full name of contributor out-of-state PAC (ID#: | | Τ | Amount of Contribution (\$) | |
| | 06/25/2025 | Haude, Shay | J | | | \$25.00 |
| | 00/20/2121 | Contributor address; City; State; Zip Code | | | | *=· ··· |
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| | | | | | | |
| | | Pflugerville, TX 78660 | | | | |
| | Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Teacher | | Pflugerville ISD | | | |
| | | | L | | | |
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| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 88/228 Rpt: 91/272 | |
|---|-------------------------------|---|---|--------------|---|---------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Talarico, Jar | nes (The Honorable) | | | 00081913 | |
| 4 | Date 06/30/2025 | 5 Full name of contributor out-of-state PAC (ID#: Hawk, Bill | | 7 | Amount of Contribution (\$) | \$50.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | Austin, TX 78734 | | | | |
| 8 | Principal occu Engineer | pation / Job title (See Instructions) | 9 Employer (See Instructions) | 3) | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/26/2025 | Hawk, Bill | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | Austin, TX 78734 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions) | 5) | | |
| | Engineer | | TRC | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Hawkins, Treavor | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | |] | | |
| | | | | | | |
| | | Saratoga Springs, UT 84045 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) | L 5) | | |
| | Supply NCO | | Utah Army National Gua | | | |
| ⊨ | Date | Full name of contributor Out-of-state PAC (ID#: |) | Π | Amount of Contribution (\$) | |
| | 06/28/2025 | Hawkins III, William | | | ••• | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | 1 | | | | |
| L | | Norfolk, MA 02056 |] | | | |
| | Principal occu Not Employe | ipation / Job title (See Instructions) ed | Employer (See Instructions) Not Employed | 3) | | |
| Γ | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Hazari, Nirali | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | 1 | | | | |
| | | San Antonio, TX 78247 | | | | |
| ⊢ | Drincinal occi | pation / Job title (See Instructions) | Employer (See Instructions) | | | |
| | Content mar | | HEB | <i>>)</i> | | |
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| | The Instru | ction Guide explains how to complete this f | form. | 1 | Total pages Schedule A1: Sch: 89/228 Rpt: 92/272 | |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | mes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Hellard, Mark | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| Ļ | Drive sized account | Columbus, OH 43215 | | Ĺ | | |
| 8 | Principal occu Recruiter | ipation / Job title (See Instructions) | 9 Employer (See Instructions AWS | S) | | |
| | | | | - | | |
| | Date | |) | | Amount of Contribution (\$) | + 00 |
| | 06/23/2025 | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Austin, TX 78727 | | | | |
| \vdash | Drincinal occu | ipation / Job title (See Instructions) | Employer (See Instructions | د) | | |
| | Not Employe | | Not Employed | 5) | | |
| ╞ | Date | | | Т | Amount of Contribution (\$) | |
| | 06/23/2025 | Full name of contributor out-of-state PAC (ID#: Henderson, David |) | | | \$50.00 |
| | 00/23/2023 | | | | | φ30.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Tyler, TX 75701 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | ed | Not Employed | | | |
| ⊨ | Date | Full name of contributor out-of-state PAC (ID#:_ | I) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Hendrix, Sherrie | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | · | | |
| | | | | | | |
| | | | | | | |
| | | Montgomery, TX 77356 | | | | |
| | • | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | ed | Not Employed | | | |
| | Date | Full name of contributor Dut-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| | 06/28/2025 | Herman, Lisa | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | |] | | |
| | | | | | | |
| | | | | | | |
| | Duin single age | Houston, TX 77042 | | Ĺ | | |
| | | <pre>upation / Job title (See Instructions) ad</pre> | Employer (See Instructions | S) | | |
| | Not Employe | ja | Not Employed | | | |
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| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1: Sch: 90/228 Rpt: 93/272 |
|--|---|
| 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Talarico, James (The Honorable) | 00081913 |
| 4 Date 5 Full name of contributor out-of-state PAC (ID#:) | 7 Amount of Contribution (\$) |
| 06/30/2025 Hermans, Emily | \$40.00 |
| 6 Contributor address; City; State; Zip Code | |
| | |
| | |
| Austin, TX 78753 | |
| 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruction) | ons) |
| Educator Texas Historical Com | mission |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/30/2025 Herring, Patricia | \$25.00 |
| Contributor address; City; State; Zip Code | |
| | |
| | |
| Aiken, SC 29803 | |
| Principal occupation / Job title (See Instructions) Employer (See Instruction | ons) |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/30/2025 Higgins, Joshua | \$25.00 |
| Contributor address; City; State; Zip Code | |
| Contributor address, City, State, Zip Code | |
| | |
| Allston, MA 02134 | |
| Principal occupation / Job title (See Instructions) Employer (See Instruction | Dns) |
| Product Manager emoney Advisor | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/28/2025 Hightower, Ann | \$100.00 |
| Contributor address; City; State; Zip Code | |
| | |
| | |
| Houston, TX 77005 | |
| Principal occupation / Job title (See Instructions) Employer (See Instruction | ons) |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/29/2025 Hilding, Barbara | \$10.00 |
| Contributor address; City; State; Zip Code | |
| Contributor address, City, State, Zip Code | |
| | |
| San Antonio, TX 78247 | |
| Principal occupation / Job title (See Instructions) Employer (See Instruction | ons) |
| Not Employed Not Employed | , |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 91/228 Rpt: 94/272 | |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | | mes (The Honorable) | | 1 | 00081913 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/27/2025 | Hilding, Barbara | | | | \$10.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | San Antonio, TX 78247 | | | | |
| 8 | Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | <u> </u> s) | | |
| • | Not Employe | | Not Employed | -, | | |
| | Date | |) | Τ | Amount of Contribution (\$) | |
| | 06/30/2025 | Hill, Erin | / | | | \$100.00 |
| | 00/00/2020 | | | • | | Ψ100.00 |
| | | CUltimbutor address, City, State, Lip Code | | | | |
| | | | | | | |
| | | San Antonio, TX 78260 | | | | |
| | Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | ed | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/23/2025 | Hiller, Jay | | | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Austin, TX 78726 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | S) | | |
| | Yoga Instruc | .tor | LASR | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Hillerbrand, Stephan | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Houston, TX 77018 | | | | |
| | Principal occu | Ipation / Job title (See Instructions) | Employer (See Instructions | L S) | | |
| | Teacher | | University of Houston | , | | |
| - | Date | Full name of contributor Out-of-state PAC (ID#: | <u> </u> | Ι | Amount of Contribution (\$) | |
| | 06/30/2025 | Hines, Andrew | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | • | | |
| | | | | | | |
| | | | | | | |
| | | Sonora, CA 95370 | | | | |
| | Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Film Director | ſ | Off Site Films | | | |
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| The Instru | iction Guide explains how to complete this f | iorm. | 1 Total pages Schedule A1: Sch: 92/228 Rpt: 95/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/25/2025 | | | \$25 |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Austin, TX 78748 | | |
| 8 Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | s) |
| Manager | | Betsy Johnson Design | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | Hockaday and Bill Martin, Tom | | \$100 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Portsmouth, RI 02871 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/24/2025 | Hodges, Jason | | \$1,000 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Houston, TX 77024 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| Entrepreneu | ır | Jason Hodges | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Hoffman, Caitlin | | \$50 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Houston, TX 77062 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| Technology | | Braze | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/23/2025 | Hoffman, Sheri | | \$100 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Austin, TX 78729 | | |
| - | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| diagnosticia | n | Invohealthcare | |
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| The Instructi | on Guide explains how to complete thi | s form. | 1 Total pages Schedule A1: Sch: 93/228 Rpt: 96/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, James | s (The Honorable) | | 00081913 |
| 4 Date 5 | Full name of contributor out-of-state PAC (IE | D#:) | 7 Amount of Contribution (\$) |
| 06/27/2025 | Holland, Walter | | \$25.00 |
| 6 | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Austin, TX 78732 | | |
| | tion / Job title (See Instructions) | 9 Employer (See Instructions | 5) |
| Not Employed | | Not Employed | |
| Date | Full name of contributor out-of-state PAC (IE | D#:) | Amount of Contribution (\$) |
| 06/26/2025 | Holley, Adriana | | \$117.83 |
| | Contributor address; City; State; Zip Code | | • |
| | | | |
| | | | |
| | Chicago, IL 60654 | | |
| Principal occupat | tion / Job title (See Instructions) | Employer (See Instructions | 3) |
| Software Engin | eer | McDonald's Corporation | 1 |
| Date | Full name of contributor out-of-state PAC (IE | D#:) | Amount of Contribution (\$) |
| 06/30/2025 | Holtz, Robin | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Wake Forest, NC 27587 | | |
| | tion / Job title (See Instructions) | Employer (See Instructions | 3) |
| HR | | IBM | |
| Date | Full name of contributor out-of-state PAC (IE | D#:) | Amount of Contribution (\$) |
| 06/30/2025 | Hong tanner, Jessica | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Apollo Beach, FL 33572 | | <u> </u> |
| | ion / Job title (See Instructions) | Employer (See Instructions | 5) |
| NP exec directo | | ALSAC | |
| Date | Full name of contributor out-of-state PAC (IE | D#:) | Amount of Contribution (\$) |
| 06/30/2025 | Hoock, Gunther | | \$50.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Makingay TV 75070 | | |
| | Mckinney, TX 75070 | Employer (Cas Instructions | |
| | ion / Job title (See Instructions) | Employer (See Instructions | 5) |
| Not Employed | | Not Employed | |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 94/228 Rpt: 97/272 | |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | ı Filers) |
| | Talarico, Jar | mes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/28/2025 | Hookey, Margaret | | | | \$10.00 |
| | I | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | D 1 1 1 1 1 1 1 1 1 1 | Annandale, VA 22003 | | Ĺ | | |
| 8 | | ipation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Retired | | Retired | — | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Pearland, TX 77581 | | | | |
| | Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | | | |
| | Dietitian | | Fresenius | 5) | | |
| ╞━ | | | | — | Amount of Contribution (¢) | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$500.00 |
| | 00/30/2025 | Hoover, Amy | | - | | \$200.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Burnet, TX 78611 | | | | |
| | Principal occu | I upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Property mg | | Admin assist | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Hopkins, Rhonda | | | | \$50.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Kennedale, TX 76060 | | | | |
| | | ipation / Job title (See Instructions) | Employer (See Instructions | 3) | | |
| | Not Employe |)d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/29/2025 | Horn, Laura | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | Drive sized appro- | Houston, TX 77024 | | | | |
| | | Ipation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | }d ────── | Not Employed | | | |
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| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1: Sch: 95/228 Rpt: 98/272 |
|--|---|
| 2 FILER NAME Talarico, James (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081913 |
| 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 06/29/2025 Horner, Rhonda | 7 Amount of Contribution (\$)\$50.00 |
| 6 Contributor address; City; State; Zip Code | |
| Amarillo, TX 79109 | |
| 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruction Financial Officer Maxwells Pumpkin Far | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/26/2025 Horton, William Contributor address; City; State; Zip Code Austin, TX 78746 | \$20.00 |
| | <u> </u> |
| Principal occupation / Job title (See Instructions) Employer (See Instruction | ns) |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/23/2025 Horton, William | \$20.00 |
| Contributor address; City; State; Zip Code | |
| Δuctin TY 787/16 | |
| Austin, TX 78746 | |
| Austin, TX 78746 Principal occupation / Job title (See Instructions) Not Employed Employed | ns) |
| Principal occupation / Job title (See Instructions) Employer (See Instruction | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Employer (See Instruction Not Employed Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Houghton, Michael | Amount of Contribution (\$) |
| Principal occupation / Job title (See Instructions) Employer (See Instruction Not Employed Not Employed Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Houghton, Michael Contributor address; City; State; Zip Code Royal Oak, MI 48067 Royal Oak, MI 48067 | Amount of Contribution (\$) |
| Principal occupation / Job title (See Instructions) Employer (See Instruction Not Employed Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Houghton, Michael Contributor address; City; State; Zip Code | Amount of Contribution (\$) |
| Principal occupation / Job title (See Instructions) Employer (See Instruction Not Employed Not Employed Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Houghton, Michael | Amount of Contribution (\$) |
| Principal occupation / Job title (See Instructions) Not Employed Employer (See Instruction Not Employed Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Houghton, Michael | Amount of Contribution (\$) \$25.00 ns) Amount of Contribution (\$) |
| Principal occupation / Job title (See Instructions) Not Employed Employer (See Instruction Not Employed Date Full name of contributor out-of-state PAC (ID#:) 06/30/2025 Houghton, Michael | Amount of Contribution (\$) Second Second Secon |

| The Instru | ction Guide explains how to complete this f | iorm. | 1 Total pages Schedule A1: Sch: 96/228 Rpt: 99/272 |
|----------------------------|--|-----------------------------------|---|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Ja | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/30/2025 | Howell, Barbara | | \$100.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | Austin, TX 78728 | | |
| 8 Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | s) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Howell, Glenna | | \$50.00 |
| | Contributor address; City; State; Zip Code | | |
| | Taylor, TX 76574 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | ;) |
| Not Employ | | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Huang-Zollner, Jo | | \$25.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78723 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | \$) |
| Media enter | tainment | JHZ creatives LTD | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Hubbard, Morgan | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | Hutto, TX 78634 | | |
| Principal occu Educator | upation / Job title (See Instructions) | Employer (See Instructions TEA | ;) |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/23/2025 | Huet, Marc Contributor address; City; State; Zip Code | | \$50.00 |
| | Austin, TX 78723 | | |
| - | upation / Job title (See Instructions) | Employer (See Instructions | 3) |
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| 6 Contributor address; City; State; Zip Code Houston, TX 77055 9 Employer (See Instructions) 7 Full name of contributor | Contribution address; City; State; Zip Code Houston, TX 77055 Principal occupation / Job title (See Instructions) Til director Principal occupation / Job title (See Instructions) Contributor address; City; State; Zip Code Manhattan Beach, CA 90266 Amount of Contribution (\$) State: Zip Code Manhattan Beach, CA 90266 Amount of Contribution (\$) Contributions) Not Employed Amount of Contribution (\$) Not Employed Amount of Contribution (\$) State: Zip Code Terrell, TX 75160 Principal occupation / Job title (See Instructions) Katy Hyatt Amount of Contribution (\$) State: Zip Code Terrell, TX 75160 Principal occupation / Job title (See Instructions) Education Consultant Contributor address; City; State: Zip Code | 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Co | ontribution (\$) | |
| 6 Contributor address; City: State; Zip Code Houston, TX 77055 9 Employer (See Instructions) T director SAP Date Full name of contributor in out-of state PAC (ID# | | 06/25/2025 | | | | | \$25.00 |
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| The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 99/228 Rpt: 102/272 | |
|--------------------|--|-------------------------------|--|-----|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) | |
| Talarico, Jar | mes (The Honorable) | | 00081913 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) | |
| 06/30/2025 | Ichinaga, Esther | | \$50. | .00 |
| | 6 Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Plano, TX 75093 | | | |
| - | upation / Job title (See Instructions) | 9 Employer (See Instructions) |) | |
| IT BSA | | Equinix | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/30/2025 | lvester, Jonathan | | \$100. | .00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Georgetown, TX 78626 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions) | <u>)</u> | |
| Not Employe | | Not Employed |) | |
| | | | Amount of Contribution (¢) | |
| Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:] J Grabowski, David |) | Amount of Contribution (\$) \$25. | 00 |
| 00/30/2023 | · | | Ψ23. | .00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Philadelphia, PA 19111 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Not Employe | ed | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 06/23/2025 | Jackson, Dee | | \$50. | .00 |
| | Contributor address; City; State; Zip Code | | | |
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| | | | | |
| | Austin, TX 78746 | | | |
| - | upation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Not Employe | | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/23/2025 | James, Rebecca | | \$10. | .00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | College Station, TX 77845 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions) |) | |
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| | The Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 100/228 Rpt: 103/272 | 2 |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | Talarico, Jar | nes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Jarosz, Gale | | | | \$15.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | | |
| | | Paradise, TX 76073 | | | | |
| 8 | | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Not Employe | 2d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Jasinski, James | | | | \$500.00 |
| | | Contributor address; City; State; Zip Code | |] | | |
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| | | Dirmingham AL 25242 | | | | |
| | Deinsinglasse | Birmingham, AL 35242 | Enveloper (Or a la struction | | | |
| | Not Employe | pation / Job title (See Instructions) | Employer (See Instructions Not Employed | S) | | |
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| | Date | |) | | Amount of Contribution (\$) | ¢150.00 |
| | 06/29/2025 | Jeanne Jordan, Amy | | | | \$150.00 |
| | | Contributor address; City; State; Zip Code | | | | |
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| | | Cedar Park, TX 78613 | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | AV labor cod | | HC Universal LLC | | | |
| ⊨ | Date | Full name of contributor out-of-state PAC (ID#: |) | Г | Amount of Contribution (\$) | |
| | 06/29/2025 | Jenkins, Gary | / | | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
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| | | Durango, CO 81301 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/29/2025 | Jenkins, Rosetta | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
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| | | Dec. 10/ 10/75 | | | | |
| \vdash | Duine i i | Bronx, NY 10475 | Employ (2) is a site | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | S) | | |
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| | The Instru | ction Guide explains how to complete thi | is form. | 1 | Total pages Schedule A1: Sch: 101/228 Rpt: 104/272 | |
|---|----------------|---|------------------------------|----|---|---------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | mes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (IE | D#:) | 7 | Amount of Contribution (\$) | |
| | 06/26/2025 | Jensen, Jane | | | | \$6.24 |
| | I | 6 Contributor address; City; State; Zip Code | | 1 | | |
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| | | Pflugerville, TX 78660 | | | | |
| 8 | | ipation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Not Employe | ;d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (IE | D#:) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Jeudy, Wil | | | | \$50.00 |
| | 1 | Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | | |
| | | Houston, TX 77008 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | | | |
| | Physician | | Next Level Urgent Care | | | |
| | Date | Full name of contributor out-of-state PAC (II | D#:) | Γ | Amount of Contribution (\$) | |
| | 06/23/2025 | John, Bette | | | | \$25.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
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| | | Round Rock, TX 78665 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | retired | | na | | | |
| | Date | Full name of contributor out-of-state PAC (IE | D#:) | Γ | Amount of Contribution (\$) | |
| | 06/23/2025 | John, Mike | | | | \$25.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
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| | | Round Rock, TX 78665 | | | | |
| | Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | retired | | na | | | |
| | Date | Full name of contributor out-of-state PAC (IE | D#:) | Ī | Amount of Contribution (\$) | |
| | 06/23/2025 | John, Robert | | | | \$15.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
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| | | Norman, OK 73071 | | | | |
| | Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Professor | | University of Oklahoma | | | |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission F | Filers) |
| | Talarico, Jar | mes (The Honorable) | | | 00081913 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| | 06/29/2025 | Johnson, Anna k | | | | \$20.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
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| | | Nacogdoches, TX 75964 | | | | |
| 8 | Principal occu | ipation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Social worke | ۶r | Community rx help | | | |
| F | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Johnson, Jennifer | | | • . | \$5.00 |
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| | | San Antonio, TX 78232 | | | | |
| \vdash | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | | |
| | Underwriter | | Usaa | -, | | |
| ╞ | | | | Т | Amount of Contribution (\$) | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | <u>ቀጋር 00</u> |
| | 06/28/2025 | Johnson, Jennifer | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
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| | | Con Antonio TV 70222 | | | | |
| | Deir singl oppu | San Antonio, TX 78232 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | S) | | |
| | Underwriter | | Usaa | - | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/29/2025 | Johnson, Julea | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | | |
| | | Bryan, TX 77802 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | ExDir Techn | lology | Bryan ISD | | | |
| F | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/27/2025 | Johnson, Mary | | | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
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| | | College Station, TX 77845 | | | | |
| ⊢ | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
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| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
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| 4 | Date | 5 Full name of contributor | out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| | 06/23/2025 | Johnson, Sara | | | | | \$50.00 |
| | | 6 Contributor address; City; State; Zip Code | | | 1 | | |
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| | | | | | | | |
| | | Westminster, CO 80234 | | · · · · · · · · · · · · · · · · · · · | | | |
| 8 | | upation / Job title (See Instructions) | | 9 Employer (See Instructions | s) | | |
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| | Date | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) | |
| | 06/26/2025 | Johnson, Stephen | | | | | \$25.00 |
| | | Contributor address; City; Stat | | | 1 | | |
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| | | Austin, TX 78753 | | · | | | |
| | - | upation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
| | Not Employe | d | | Not Employed | _ | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/28/2025 | Johnston, Heather | | | | | \$25.00 |
| | | Contributor address; City; Stat | | | 1 | | |
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| | | Noblesville, IN 46062 | | | | | |
| | - | upation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
| | Physical The | erapist | | lvy | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) | |
| | 06/25/2025 | Jones, John | | | | | \$25.00 |
| | | Contributor address; City; Stat | | | 1 | | |
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| | D i vizel essi | Katy, TX 77494 | | | Ĺ | | |
| | • | upation / Job title (See Instructions) | | Employer (See Instructions | S) | | |
| | Attorney | | | Self | - | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/29/2025 | Jones, Lisa | | |] | | \$100.00 |
| | | Contributor address; City; Stat | te; Zip Code | |] | | |
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| | | Austin, TX 78751 | | <u> </u> | Ĺ | | |
| | | upation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
| | admin assi | | | Texas Senate | | | |
| | admin asst | · · · · · | | Texas Senate | | | |
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| The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 104/228 Rpt: 107/272 |
|--------------------|--|--|---|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/26/2025 | Jones, Matt | | \$250.0 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| | Cedar Park, TX 78613 | | |
| - | | 9 Employer (See Instructions) | ;) |
| Software dev | · | United steel supply | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/28/2025 | Jones, Valerie | | \$25.0 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Coppell, TX 75019 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | ;) |
| Lawyer | | Oracle America Inc | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/29/2025 | Jonquil, Casey | | \$100.0 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Portland, OR 97212 | | |
| Dringing occu | | Employer (See Instructions | |
| Not Employe | upation / Job title (See Instructions) | Employer (See Instructions Not Employed | ;) |
| | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/25/2025 | Jordahl, Craig | | \$10.0 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Boulder City, NV 89005 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> |
| Not Employe | | Not Employed | <i>י</i> / |
| | | | Amount of Contribution (\$) |
| Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#: Jordan, James |) | Amount of Contribution (\$) \$25.0 |
| 00/30/2023 | | | ψ20.0 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Dallas, TX 75238 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> |
| Property ma | | James Jordan | " " |
| | | | |
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| | The Instru | ction Guide explains how t | to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 105/228 Rpt: 108/2 | 72 |
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| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commissio | on Filers) |
| | Talarico, Jar | nes (The Honorable) | | | | 00081913 | |
| 4 | Date | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/26/2025 | Jordan, Judith | | | | | \$30.00 |
| | | 6 Contributor address; City; State | te; Zip Code | | | | |
| | | | | | | | |
| | | Kerrville, TX 78028 | | | | | |
| 8 | | pation / Job title (See Instructions) | | 9 Employer (See Instructions | 5) | | |
| | Bookkeeper | | | self | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/27/2025 | Joseph, George | | | | | \$1,000.00 |
| | | Contributor address; City; Stat | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Houston, TX 77019 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Entrepreneu | r | | Self | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/29/2025 | Jurgens, Kathleen | | | | | \$50.00 |
| | | Contributor address; City; State | e; Zip Code | | | | |
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| | | Austin, TX 78727 | | | Ĺ | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | | | |
| | Instructor; A | | | Austin Community Colle | ge | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Jurgens, Kathleen | | | | | \$50.00 |
| | | Contributor address; City; State | e; Zip Code | | | | |
| | | | | | | | |
| | | Austin, TX 78727 | | | | | |
| | Drincinal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u>ا</u> | | |
| | Instructor; A | | | Austin Community Colle | | | |
| ╞ | | | 7 | | -9- I | | |
| | Date 06/30/2025 | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$50.00 |
| | 00/30/2025 | Jurgens, Kathleen | | | | | \$00.00 |
| | | Contributor address; City; State | e; Zip Code | | | | |
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| | | Austin, TX 78727 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| | Instructor; A | | | Austin Community Colle | | | |
| | | | l | | 5 | | |
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| The Instruc | ction Guide explains how to complete this | 1 Total pages Schedule A1: Sch: 106/228 Rpt: 109/272 | | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) | |
| | nes (The Honorable) | | 00081913 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: | :) | 7 Amount of Contribution (\$) | |
| 06/29/2025 | Jurgens, Kathleen | | \$50. | 0.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 | |
| | Austin, TX 78727 | | | |
| 8 Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | 3) | |
| Instructor; Ac | lvisor | Austin Community Colle | e | |
| Date | Full name of contributor out-of-state PAC (ID#: | :) | Amount of Contribution (\$) | |
| 06/23/2025 | KRACHT, RUSSELL | | | 5.00 |
| | | | 1 | |
| | Huffman, TX 77336 | | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | |
| Not Employe | d | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#: | :) | Amount of Contribution (\$) | |
| 06/23/2025 | Kannenberg, Wade | - <u></u> | | 8.00 |
| | Contributor address; City; State; Zip Code | | 1 | |
| Principal occu | Sherman, TX 75090 pation / Job title (See Instructions) | Employer (See Instructions | a 1 | |
| Electronic teo | | Texas instruments | >) | |
| | | | | |
| Date | | :) | Amount of Contribution (\$) | |
| 06/30/2025 | Kaposta, Bruce | | \$100. | 00. |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Lakeway, TX 78734 | | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | |
| president | | crc | | |
| Date | Full name of contributor out-of-state PAC (ID#: | ·) | Amount of Contribution (\$) | |
| 06/30/2025 | Karny, Lori | - <u></u> | \$25. | i.00 |
| | Contributor address; City; State; Zip Code | | 1 | |
| | | | | |
| | | | | |
| | Los Angeles, CA 90048 | | l | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | |
| Clinical Socia | al Worker | Self | | |
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| | The Instruction Guide explains how to complete this form. | | | 1 | Total pages Schedule A1: Sch: 107/228 Rpt: 110/27 | 72 | |
| 2 | 2 FILER NAME | | | | 3 | Filer ID (Ethics Commissio | on Filers) |
| | | nes (The Honorable) | | | | 00081913 | |
| 4 | Date | 5 Full name of contributor Out-of-state PAC (ID# |)#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Kazlauskas, Kevin | | | | | \$50.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Madison, TN 37115 | | | | | |
| 8 | | pation / Job title (See Instructions) | | mployer (See Instructions |) | | |
| | Dog trainer | | S | self | | | |
| | Date | Full name of contributor out-of-state PAC (ID# |)#: |) | | Amount of Contribution (\$) | |
| | 06/29/2025 | Kearney, Michael J | | | | | \$1,000.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Cohasset, MA 02025 | | | | | |
| | | pation / Job title (See Instructions) | | mployer (See Instructions |) | | |
| | Not Employe | :d | N | lot Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID# |)#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Keesee, Denise | | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Salado, TX 76571 | | | | | |
| | | pation / Job title (See Instructions) | | mployer (See Instructions |) | | |
| | Speech path | ologist | | Ccisd | | | |
| | Date | Full name of contributor out-of-state PAC (ID# |)#: |) | | Amount of Contribution (\$) | |
| | 06/27/2025 | Keigher, Robert | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Indio, CA 92203 | | | | | |
| | | pation / Job title (See Instructions) | | mployer (See Instructions |) | | |
| | Not Employe | :d | | lot Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID# |)#: |) | | Amount of Contribution (\$) | _ |
| | 06/30/2025 | Kelley, Jessica | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | San Antonio, TX 78266 | | | | | |
| | | pation / Job title (See Instructions) | | mployer (See Instructions | | | |
| | Director of D | oonor Relations | A | lamo Heights School F | ou | ndation | |
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| The Instru | ction Guide explains how to complete this f | iorm. | 1 Total pages Schedule A1: Sch: 108/228 Rpt: 111/272 | |
| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers | s) | |
| | mes (The Honorable) | | 00081913 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) | |
| 06/25/2025 | Kelly, Neva | | \$10 | 00.00 |
| | 6 Contributor address; City; State; Zip Code | | | |
| | | | | |
| | San Antonio, TX 78232 | | | |
| 8 Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions) |) | |
| Not Employe | | Not Employed | 1 | |
| Date | | | Amount of Contribution (\$) | |
| 06/25/2025 | Kelly, Zachary |) | | 25.00 |
| 00/25/2025 | | | ΨΔ | .5.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Austin, TX 78746 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Not Employe | | Not Employed | · | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/28/2025 | Kennedy, Mary | , | | L0.00 |
| | Contributor address; City; State; Zip Code | | I | |
| | | | | |
| | | | | |
| | Conroe, TX 77301 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Not Employe | ed | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/27/2025 | Kennedy, Patricia | | \$2 | 25.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Austin, TX 78741 | | | |
| | upation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Not Employe | ed | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/28/2025 | Kennon, Jacque | | \$2 | 25.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Terrell, TX 75160 | | | |
| | upation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Not Employe | ed | Not Employed | | |
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| The Instru | ction Guide explains how to comple | 1 Total pages Schedule A1: Sch: 109/228 Rpt: 112/272 | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state | e PAC (ID#:) | 7 Amount of Contribution (\$) |
| 06/30/2025 | Keough, Renee | | \$50.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | Austin, TX 78717 | | |
| | upation / Job title (See Instructions) | 9 Employer (See Instructions | 5) |
| Education | | Fortune 500 company | |
| Date | | e PAC (ID#:) | Amount of Contribution (\$) |
| 06/29/2025 | Kever, Sonja | | \$100.00 |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| D i vinal ava | Austin, TX 78731 | | <u> </u> |
| - | upation / Job title (See Instructions) | Employer (See Instructions | 5) |
| Artist | | Self | . |
| Date | _ | e PAC (ID#:) | Amount of Contribution (\$) |
| 06/23/2025 | Keyburn, Robert | | \$100.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Austin, TX 78727 | | |
| Princinal occu | upation / Job title (See Instructions) | Employer (See Instructions | <) |
| retired | | retired | 5) |
| Date | Full name of contributor | e PAC (ID#:) | Amount of Contribution (\$) |
| 06/30/2025 | Khorasani, Rhonda | e PAC (ID#) | \$20.00 |
| 00,00,2020 | | | |
| | Contributor address; City; State; Zip Code | 1 | |
| | | | |
| | Garland, TX 75044 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| Project Coor | rdinator | Cantex Continuing Care | e Network |
| Date | Full name of contributor out-of-state | e PAC (ID#:) | Amount of Contribution (\$) |
| 06/30/2025 | Khoury, Kamal | | \$50.00 |
| | Contributor address; City; State; Zip Code |) | 1 |
| | | | |
| | | | |
| | Austin, TX 78754 | | |
| - | upation / Job title (See Instructions) | Employer (See Instructions | 5) |
| Not Employe | ed | Not Employed | |
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| The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 110/228 Rpt: 113/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/28/2025 | Kincaid, Lynne | | \$100.00 |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| | Austin TV 707E1 | | |
| Drincinal occu | Austin, TX 78751 upation / Job title (See Instructions) | 9 Employer (See Instructions | |
| Marketing C | | Self | () |
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| Date 06/30/2025 | |) | Amount of Contribution (\$) \$25.00 |
| 00/30/2025 | | | φζοιου |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Brenham, TX 77833 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | () () |
| Not Employe | | Not Employed | , |
| Date | Full name of contributor out-of-state PAC (ID#: | | Amount of Contribution (\$) |
| 06/30/2025 | King, Monteen | / | \$25.00 |
| 00,00,2020 | Contributor address; City; State; Zip Code | | |
| | Contributor address, City, State, Zip Code | | |
| | | | |
| | Brenham, TX 77833 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | ;) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/23/2025 | King, William D | | \$100.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Austin, TX 78756 | | |
| - | upation / Job title (See Instructions) | Employer (See Instructions |) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | Kirkpatrick, Christie | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Frenklin TN 27064 | | |
| Dringing oog | Franklin, TN 37064 | | <u> </u> |
| Principal occu Nurse Practi | upation / Job title (See Instructions) | Employer (See Instructions Teamhealth | •) |
| Nurse Practi | | Teannealth | |
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| The Instru | ction Guide explains how to complete this f | 1 Total pages Schedule A1: Sch: 111/228 Rpt: 114/272 | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/30/2025 | Kirkpatrick, Kimberly | | \$200.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | Diana, TX 75640 | | |
| | upation / Job title (See Instructions) | 9 Employer (See Instructions | 3) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Kirschman, Jane | | \$100.00 |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| | Round Rock, TX 78664 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Lead Publish | hing Review Specialist | НМН | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | Kling, Jennifer | | \$25.00 |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| | College Station, TX 77840 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Editor | | The Wyman Company | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Knight, Anita | | \$100.00 |
| l | Contributor address; City; State; Zip Code | | 1 |
| 1 | | | |
| | | | |
| L | West Lake Hills, TX 78746 | | <u> </u> |
| | upation / Job title (See Instructions) | Employer (See Instructions | \$) |
| Not Employe | | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/26/2025 | Kobell, Joseph | | \$250.00 |
| 1 | Contributor address; City; State; Zip Code | | 1 |
| 1 | | | |
| l | | | |
| | Dallas, TX 75225 | , | |
| | upation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Real estate | | Self | |
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| т | The Instruction Guide explains how to complete this form. | | | 1 | Total pages Schedule A1: Sch: 112/228 Rpt: 115/272 | 2 | |
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| 2 F | ILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | | nes (The Honorable) | | | | 00081913 | / |
| 4 D | Date | 5 Full name of contributor out-of-state PAC | C (ID#: |) | 7 | Amount of Contribution (\$) | |
| 0 | 6/25/2025 | Kockelman, Kara | | | | | \$100.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| 9 D | Principal occu | West Lake Hills, TX 78746 pation / Job title (See Instructions) | 0 | Employer (See Instructions | <u> </u> | | |
| | professor | | 5 | UT Austin | ») | | |
| D | Date | Full name of contributor out-of-state PAC | C (ID#: |) | | Amount of Contribution (\$) | |
| 0 | 6/27/2025 | Kracht, Russell | | | | | \$5.00 |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Huffman, TX 77336 | | | | | |
| Р | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| Ν | Not Employe | d | | Not Employed | | | |
| D | Date | Full name of contributor 🛛 out-of-state PAC | C (ID#: |) | | Amount of Contribution (\$) | |
| 0 | 6/29/2025 | Krasne, Robert | | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | 1 | | |
| | | | | | | | |
| | | | | | | | |
| | | El Paso, TX 79912 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| N | Not Employe | 20 | | Not Employed | | | |
| D | Date | Full name of contributor 🔲 out-of-state PAC | C (ID#: |) | | Amount of Contribution (\$) | |
| 0 | 6/26/2025 | Krasne, Robin | | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | El Paso, TX 79912 | | | | | |
| P | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> յ) | | |
| | Hr | | | Alamo Auto supply | , | | |
| | Date | Full name of contributor out-of-state PAC | C (ID#: |) | | Amount of Contribution (\$) | |
| |)6/25/2025 | Krutsinger, Dennis | ο (iD# |) | | | \$25.00 |
| Ū | 0,20,2020 | Contributor address; City; State; Zip Code | | | | | +20.00 |
| | | Contributor address, City, State, Zip Code | | | | | |
| | | | | | | | |
| | | Austin, TX 78730 | | | | | |
| P | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| N | lot employe | d | | Not employed | | | |
| | | | l | | | | |
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| The Instru | iction Guide explains how to complete th | 1 Total pages Schedule A1: Sch: 113/228 Rpt: 116/272 | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC | (ID#:) | 7 Amount of Contribution (\$) |
| 06/28/2025 | | | \$100.0 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | Lakeway, TX 78734 | | |
| Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | <u> </u> |
| Not Employe | | Not Employed | <i>יו</i> |
| | | | |
| Date | — | (ID#:) | Amount of Contribution (\$) |
| 06/30/2025 | | | \$100.0 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Austin, TX 78757 | | |
| Principal occu | | Employer (See Instructions | <u></u> |
| Legislative C | upation / Job title (See Instructions) | Deanna L. Kuykendall Ir | |
| | | | |
| Date | | (ID#:) | Amount of Contribution (\$) |
| 06/30/2025 | LEVAK, ANNA | | \$25.0 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | New York, NY 10009 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> |
| Retail | | Mini Jake | " |
| Date | Full name of contributor | | Amount of Contribution (\$) |
| Dale 06/25/2025 | LaGuette, Arielle | (ID#:) | Amount of Contribution (\$) \$25.0 |
| 00/20/2020 | | | ψ <u>∠</u> υ.υ |
| | Contributor address; City; State; Zip Code | | |
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| | Austin, TX 78704 | | |
| Principal occl | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> \$) |
| Sales Mana | | Favor Delivery | , |
| Date | Full name of contributor out-of-state PAC | | Amount of Contribution (\$) |
| 06/30/2025 | Labrada, Miguel | (10#) | \$5.0 |
| 00,00, | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Dallas, TX 75254 | | |
| Principal occl | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> \$) |
| Shipping cle | | Global views LLC | , |
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| The Instru | uction Guide explains how to complete this f | 1 Total pages Schedule A1: Sch: 114/228 Rpt: 117/272 | | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filer | rs) |
| Talarico, Ja | imes (The Honorable) | | 00081913 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) | |
| 06/28/2025 | Lambright, Randall | | \$1 | 10.00 |
| | 6 Contributor address; City; State; Zip Code | | | |
| | | | | |
| | South Daytona, FL 32119 | | | |
| 8 Principal occ | upation / Job title (See Instructions) | 9 Employer (See Instructions | <u> </u> | |
| Business A | | Jack Henry | 7 | |
| Date | Full name of contributor out-of-state PAC (ID#:_ | | Amount of Contribution (\$) | |
| 06/26/2025 | | / | | 00.00 |
| 00,20,2022 | Contributor address; City; State; Zip Code | | | 50.00 |
| | Continuation address, City, State, Zip Code | | | |
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| | Austin, TX 78727 | | | |
| Principal occ | upation / Job title (See Instructions) | Employer (See Instructions | ;) | |
| Not Employ | ed | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 06/29/2025 | — — | | \$1 | 15.00 |
| | Contributor address; City; State; Zip Code | | | |
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| | | | | |
| | Austin, TX 78757 | - | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | ;) | |
| Not Employ | | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/29/2025 | | | \$1 | 15.00 |
| | Contributor address; City; State; Zip Code | | | |
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| | Austin, TX 78757 | | | |
| Principal occ | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | |
| Not Employ | | Not Employed | 7 | |
| Date | Full name of contributor out-of-state PAC (ID#:_ | | Amount of Contribution (\$) | |
| 06/30/2025 | | / | | 10.00 |
| 00/00/2022 | Contributor address; City; State; Zip Code | | | 10100 |
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| | Austin, TX 78757 | | | |
| Principal occ | upation / Job title (See Instructions) | Employer (See Instructions | ;) | |
| Not Employ | ed | Not Employed | | |
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| The Instru | The Instruction Guide explains how to complete this form. | | | 1 Total pages Schedule A1: Sch: 115/228 Rpt: 118/272 | | |
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| 2 FILER NAME | | | 3 | Filer ID (Ethics Commission | ı Filers) | |
| Talarico, Jar | mes (The Honorable) | | | 00081913 | | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | | |
| 06/30/2025 | Langlinais, Nevyn | | | | \$10.00 | |
| | 6 Contributor address; City; State; Zip Code | | | | | |
| | | | | | | |
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| | Austin, TX 78757 | | | | | |
| | upation / Job title (See Instructions) | 9 Employer (See Instructions) | s) | | | |
| Not Employe | | Not Employed | | | | |
| Date | |) |] | Amount of Contribution (\$) | _ | |
| 06/26/2025 | | | | | \$100.00 | |
| | Contributor address; City; State; Zip Code | |] | | | |
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| | | | | | | |
| | Lakeway, TX 78734 | | Ĺ | | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | s) | | | |
| Not Employe | | Not Employed | <u> </u> | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) |] | Amount of Contribution (\$) | | |
| 06/30/2025 | Larson, Karianne | | | | \$25.00 | |
| | Contributor address; City; State; Zip Code | |] | | | |
| | | | | | | |
| | | | | | | |
| | Superior, CO 80027 | | Ĺ | | | |
| - | upation / Job title (See Instructions) | Employer (See Instructions | 5) | | | |
| Therapist | | Mindfully CO | , | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | | |
| 06/30/2025 | LeBlanc, Tanisha | | | | \$25.00 | |
| | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | |
| | Crowley, TX 76036 | | | | | |
| Drincinal occu | upation / Job title (See Instructions) | Employer (See Instructions | | | | |
| Teacher | | IDEA Public Schools | 5) | | | |
| | | l | — | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | ÷=00.00 | |
| 06/23/2025 | LeUnes, Judy | | | | \$500.00 | |
| | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | |
| | College Station TX 77845 | | | | | |
| Dringing oog | College Station, TX 77845 | Employer (Cool Instructions | <u> </u> | | | |
| Not Employe | upation / Job title (See Instructions) | Employer (See Instructions) Not Employed | 3) | | | |
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| The Instruc | The Instruction Guide explains how to complete this form. | | | tal pages Schedule A1: h: 116/228 Rpt: 119/272 | 2 |
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| 2 FILER NAME | | | 3 File | er ID (Ethics Commission | Filers) |
| | nes (The Honorable) | | | 081913 | , |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 An | nount of Contribution (\$) | |
| 06/28/2025 | Leder, Robert | | | | \$5.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | |
| | Euless, TX 76039 | | | | |
| 8 Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | <u>1</u> 5) | | |
| Not Employe | | Not Employed | , | | |
| Date | Full name of contributor Out-of-state PAC (ID#: | <u> </u> | Am | nount of Contribution (\$) | |
| 06/25/2025 | Lee, Jeannine |) | | | \$15.00 |
| 00/20/2020 | | | - | | Ψ10.00 |
| | Contributor address; City; State; Zip Code | | | | |
| | | | | | |
| | Garland, TX 75043 | | | | |
| Principal occur | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| IT Project Mg | | AgreeYa Solutions | 5) | | |
| - | | | <u> </u> | | |
| Date | — |) | An | nount of Contribution (\$) | +=0.00 |
| 06/28/2025 | Lee, Stewart | | | | \$50.00 |
| | Contributor address; City; State; Zip Code | | | | |
| | | | | | |
| | | | | | |
| | Dallas, TX 75208 | 1 | | | |
| | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| Real estate | | Self | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | An | nount of Contribution (\$) | |
| 06/26/2025 | Leeper, Robert | | | | \$50.00 |
| | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | |
| | | | | | |
| | Austin, TX 78739 | - | | | |
| | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| Not Employe | d | Not Employed | | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | An | nount of Contribution (\$) | |
| 06/30/2025 | Lemke, Kristin | | | | \$100.00 |
| | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | |
| | | | | | |
| | The Hills, TX 78738 | | | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| Attorney | | Self | | | |
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| The Instru | iction Guide explains how to complete this f | 1 Total pages Schedule A1: Sch: 117/228 Rpt: 120/272 | | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) | |
| Talarico, Ja | mes (The Honorable) | | 00081913 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) | |
| 06/28/2025 | | | \$2.50 | |
| | 6 Contributor address; City; State; Zip Code | | 1 | |
| | Arvada, CO 80005 | | | |
| | upation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | |
| Not employ | ed | Not employed | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/30/2025 | Linder, Lindsey | | \$250.00 | |
| | Contributor address; City; State; Zip Code | | 1 | |
| | | | | |
| | | | | |
| | Houston, TX 77009 | | | |
| Principal occ | upation / Job title (See Instructions) | Employer (See Instructions | 5) | |
| General cou | Insel | Harris County | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ | ·) | Amount of Contribution (\$) | |
| 06/30/2025 | Lippincott, Elizabeth | | \$50.00 | |
| | Contributor address; City; State; Zip Code | | • | |
| | | | | |
| | | | | |
| | Statesboro, GA 30458 | | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | s) | |
| Administrati | ve Assistant | Medical Office | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/30/2025 | Long, Allison | | \$50.00 | |
| | Contributor address; City; State; Zip Code | | 1 | |
| | | | | |
| | | | | |
| | Houston, TX 77008 | | | |
| Principal occ | upation / Job title (See Instructions) | Employer (See Instructions | s) | |
| Lawyer | | State of texas | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/30/2025 | Lopez, Chloe | | \$10.00 | |
| | Contributor address; City; State; Zip Code | | 1 | |
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| | | | | |
| | San Antonio, TX 78240 | | | |
| Principal occ | upation / Job title (See Instructions) | Employer (See Instructions | s) | |
| Paralegal | | Ben m sifuentes jr pc | | |
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| Tł | he Instru | ction Guide explains how to compl | lete this forr | m. | 1 | Total pages Schedule A1: Sch: 118/228 Rpt: 121/272 | 2 |
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| 2 FII | LER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | nes (The Honorable) | | | | 00081913 | |
| 4 Da | ate | 5 Full name of contributor out-of-stat | ate PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| 06 | 6/30/2025 | Lopez, Michelle | | | | | \$25.00 |
| | ł | 6 Contributor address; City; State; Zip Code | e | | | | |
| | ļ | l | | | | | |
| | | San Antonio, TX 78249 | | | | | |
| | | pation / Job title (See Instructions) | 9 | Employer (See Instructions | 5) | | |
| Ed | ducation | | | Isd | | | |
| Da | ate | Full name of contributor 🛛 out-of-stat | ite PAC (ID#: |) | | Amount of Contribution (\$) | |
| 06 | 6/30/2025 | Lopez, Nicholas | | | | | \$10.00 |
| 1 | ł | Contributor address; City; State; Zip Code | | | | | |
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| | | Glendale, AZ 85301 | | | | | |
| Pri | incipal occu | pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| Ac | ccountant | | | Nick Lopez | | | |
| Da | ate | Full name of contributor out-of-stat | ate PAC (ID#: |) | | Amount of Contribution (\$) | |
| 06 | 6/27/2025 | Lormor, Rebecca | | | | | \$10.00 |
| | ł | Contributor address; City; State; Zip Code | | | | | |
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| | | Richardson, TX 75080 | | | | | |
| Pri | incipal occu | pation / Job title (See Instructions) | | Employer (See Instructions | · | | |
| Те | echnical W | riter | | Cornerstone StaffingSta | ffir | 1g | |
| Da | ate | Full name of contributor out-of-stat | ite PAC (ID#: |) | | Amount of Contribution (\$) | |
| 06 | 6/23/2025 | Love, Julie | | | | | \$10.00 |
| | ł | Contributor address; City; State; Zip Code | | | | | |
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| | | Rio Medina, TX 78066 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| No | ot employe | d | | Not employed | | | |
| Da | ate | Full name of contributor 🗌 out-of-stat | ate PAC (ID#: |) | | Amount of Contribution (\$) | |
| 06 | 6/30/2025 | Lovett, Suzanne | | | | | \$100.00 |
| | ł | Contributor address; City; State; Zip Code | | | | | |
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| | ļ | Dallas, TX 75240 | | | | | |
| Pri | incipal occu | pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
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| | The Instruction Guide explains how to complete this form. | | | 1 | Total pages Schedule A1: Sch: 119/228 Rpt: 122/272 | |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Talarico, Jar | nes (The Honorable) | | | 00081913 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Lowe, Monica | | | | \$50.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Austin, TX 78750 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Head of sale | es enablement | Qualtrics | | | |
| F | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/27/2025 | Lozano, Rebecca | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | | |
| | | Great Falls, MT 59401 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | ed | Not Employed | | | |
| ⊨ | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Lozano, Sandra | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Houston, TX 77065 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Teacher | | Public school | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Lui, Paul | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Broken Arrow, OK 74012 | | | | |
| | • | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | ed | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/28/2025 | Lundgren, Judy | | | | \$5.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | | |
| | | Fort Worth, TX 76102 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | ed | Not Employed | | | |
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| 6 Contributor address; City; State; Zip Code Manhattan Beach, CA 90266 8 Principal occupation / Job title (See Instructions) Software Engineer 9 Employer (See Instructions) RTC Date Full name of contributor out-of-state PAC (ID#:) Luther, Sunny Amount of Contribution (\$) 06/30/2025 Luther, Sunny S100.00 Contributor address; City; State; Zip Code S100.00 Georgetown, TX 78633 Employer (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Not Employed Amount of Contribution (\$) | | |
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| Talarico, James (The Honorable) 00081913 4 Date 5 Full name of contribution nut-of-state PAC (Dat:) 7 Amount of Contribution (S) 06/30/2025 6 Contribution address; City, State; Zip Code 7 Amount of Contribution (S) 08/30/2025 6 Contribution address; City, State; Zip Code 8 Principal occupation / Job title (See Instructions) 08 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 06/30/2025 Luther, Sunny 0 aut-of-state PAC (Dat: | The Instruction Guide explains how to complete this form. | |
| Talarico, James (The Honorable) 00081913 4 Date 06/30/2025 5 Full name of contributor out-of-state PAC (IDM:) 7 Amount of Contribution (S) S100.00 6 Contributor address; City; State; Zip Code 8 Principal occupation / Job title (See Instructions) Software Engineer 9 Employer (See Instructions) RTC Amount of Contribution (S) Software Engineer 0 06/30/2025 Full name of contributor out-of-state PAC (IDM: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| 06/30/2025 Luong, Margie \$100.00 6 Contributor address; City; State: Zip Code \$100.00 8 Principal occupation / Job tite (See Instructions) 9 Employer (See Instructions) Software Engineer Amount of Contribution (\$) \$100.00 06/30/2025 Full name of contributor out-of-state PAC (10)* Amount of Contribution (\$) 06/30/2025 Contributor address; City: State: Zip Code Amount of Contribution (\$) \$100.00 06/30/2025 Full name of contributor out-of-state PAC (10)* Amount of Contribution (\$) \$100.00 06/30/2025 Full name of contributor out-of-state PAC (10)* Amount of Contribution (\$) \$100.00 06/30/2025 Full name of contributor out-of-state PAC (10)* Amount of Contribution (\$) \$50.00 06/23/2025 Full name of contributor out-of-state PAC (10)* Amount of Contribution (\$) \$20.00 06/23/2025 Lyon, Nancy Employer (See Instructions) Amount of Contribution (\$) \$20.00 06/23/2025 Full name of contributor out-of-state PAC (10)* Amount of Contribution (\$) \$20.00 06/23/2025 Lyon, Cynthia Contributor addres | Talarico, James (The Honorable) | 00081913 |
| 6 Contributor address; City: State; Zip Code Manhattan Beach, CA 90266 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) RTC Date Full name of contributor out of state PAC (tor: | 4 Date 5 Full name of contributor out-of-state PAC (ID#: |) 7 Amount of Contribution (\$) |
| i 6 Contributor address; City; Sinte; Zip Code Manhattan Beach, CA 90266 9 Employer (See Instructions) RTC Software Engineer Amount of Contribution (S) Luther, Sunny Amount of Contribution (S) Contributor address; City; Sinte; Zip Code Date Full name of contributor cu-ot-state PAC (ID# | 5, 5 | \$100.00 |
| 8 Principal occupation / Job title (See Instructions) Software Engineer 9 Employer (See Instructions) RTC Date 06/30/2025 Full name of contributor | | |
| 8 Principal occupation / Job title (See Instructions) Software Engineer 9 Employer (See Instructions) RTC Date 06/30/2025 Full name of contributor | | |
| 8 Principal occupation / Job title (See Instructions) Software Engineer 9 Employer (See Instructions) RTC Date 06/30/2025 Full name of contributor | | |
| Software Engineer RTC Date 06/30/2025 Full name of contributor out-of-state PAC (10):: | | |
| Date Full name of contributor out-of-state PAC (IDir Amount of Contribution (\$) 06/30/2025 Luther, Sunny \$100.00 Contributor address; City; State; Zip Code State; Zip Code \$100.00 Georgetown, TX 78633 Employer (See Instructions) Not Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (IDir Amount of Contribution (\$) 06/23/2025 Full name of contributor out-of-state PAC (IDir Amount of Contribution (\$) 06/23/2025 Full name of contributor out-of-state PAC (IDir Amount of Contribution (\$) 06/23/2025 Full name of contributor out-of-state PAC (IDir Amount of Contribution (\$) 06/23/2025 Full name of contributor out-of-state PAC (IDir Amount of Contribution (\$) 06/23/2025 Full name of contributor out-of-state PAC (IDir Amount of Contribution (\$) 06/23/2025 Full name of contributor out-of-state PAC (IDir Amount of Contribution (\$) 06/23/2025 Full name of contributor out-of-state PAC (IDir Amount of Contribution (\$) 06/23/2025 Full name of contributor out-of-state PAC (IDir Amount of Contribution (\$) | | r (See Instructions) |
| 06/30/2025 Luther, Sunny \$\$100.00 Contributor address; City; State; Zip Code \$\$100.00 Georgetown, TX 78633 Employer (See Instructions) Not Employed Amount of Contribution (S) Date Full name of contributor | | |
| Contributor address; City; State; Zip Code Georgetown, TX 78633 Principal occupation / Job title (See Instructions) Not Employed Date 06/23/2025 Lynch, Nancy Contributor address; City; State; Zip Code Mount Vernon, WA 98274 Principal occupation / Job title (See Instructions) Not Employed Mount Vernon, WA 98274 Principal occupation / Job title (See Instructions) Not Employed Date 06/23/2025 Lynch, Nancy Contributor address; City; State; Zip Code Mount Vernon, WA 98274 Principal occupation / Job title (See Instructions) Not Employed Date 06/23/2025 Lyon, Cynthia Contributor address; City; State; Zip Code Austin, TX 78722 Principal occupation / Job title (See Instructions) Real estate broker Self Date 06/29/2025 Full name of contributor | | |
| Contributor address; City; State; Zip Code Georgetown, TX 78633 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID# | | \$100.00 |
| Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributorout-of-state PAC (ID#:) Contributor address; City; State; Zip Code Amount of Contribution (\$) \$50.00 06/23/2025 Lynch, Nancy Contributor address; City; State; Zip Code Mount Vernon, WA 98274 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) S20.00 Date Full name of contributorout-of-state PAC (ID#:) Lyon, Cynthia Amount of Contribution (\$) S20.00 O6/23/2025 Full name of contributorout-of-state PAC (ID#:) Lyon, Cynthia Amount of Contribution (\$) S20.00 Principal occupation / Job title (See Instructions) Real estate broker Employer (See Instructions) Self Amount of Contribution (\$) S5.00 Date Full name of contributorout-of-state PAC (ID#:) AACKENZIE, Larami Amount of Contribution (\$) S5.00 O6/29/2025 Full name of contributorout-of-state PAC (ID#:) AACKENZIE, Larami Amount of Contribution (\$) S5.00 O6/29/2025 Full name of contributor S5.00 S5.00 | | |
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| Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/23/2025 Lyon, Cynthia s20.00 Contributor address; City; State; Zip Code austin, TX 78722 Principal occupation / Job title (See Instructions) Employer (See Instructions) Real estate broker self Date Full name of contributor out-of-state PAC (ID#:) 06/29/2025 MACKENZIE, Larami Amount of Contribution (\$) 06/29/2025 Glenside, PA 19038 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) | | |
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| The Instru | ction Guide explains how to complete this f | 1 Total pages Schedule A1: Sch: 121/228 Rpt: 124/272 | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/25/2025 | MACKENZIE, Larami | | \$10.0 |
| | 6 Contributor address; City; State; Zip Code | | n |
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| | Glenside, PA 19038 | | |
| | upation / Job title (See Instructions) | 9 Employer (See Instructions | s) |
| physician | | Dr. | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/28/2025 | MACKENZIE, Larami | | \$10.0 |
| | Contributor address; City; State; Zip Code | | |
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| | Glenside, PA 19038 | | |
| | pation / Job title (See Instructions) | Employer (See Instructions | s) |
| physician | | Dr. | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/29/2025 | Macina, Mary | | \$25.0 |
| | Contributor address; City; State; Zip Code | | |
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| | | | |
| | Pflugerville, TX 78660 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| Not Employe | ;d | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/28/2025 | Mack, Gregory | | \$35.0 |
| | Contributor address; City; State; Zip Code | | n |
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| | | | |
| | Austin, TX 78750 | <u> </u> | <u> </u> |
| | ipation / Job title (See Instructions) | Employer (See Instructions | s) |
| Electrical En | - | Alereon Inc. | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Mack, Kerrianne | | \$25.0 |
| | Contributor address; City; State; Zip Code | | |
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| | | | |
| | San Antonio, TX 78249 | 1 | <u> </u> |
| | Ipation / Job title (See Instructions) | Employer (See Instructions | s) |
| Section 504 | Specialist | Northside ISD | |
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| The Instru | iction Guide explains how to complete this f | iorm. | 1 Total pages Schedule A1: Sch: 122/228 Rpt: 125/272 |
|----------------|---|------------------------------|---|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Ja | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/23/2025 | | | \$3.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | Longview, WA 98632 | | |
| | upation / Job title (See Instructions) | 9 Employer (See Instructions | \$) |
| Not Employ | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Madsen, Jason | | \$250.00 |
| | Contributor address; City; State; Zip Code | | 1 |
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| | | | |
| | Marietta, GA 30068 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| Executive | | Ascend medical | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | Madsen, McKay | | \$25.00 |
| | Contributor address; City; State; Zip Code | | 4 |
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| Principal occı | upation / Job title (See Instructions) | Employer (See Instructions | \$) |
| Not Employ | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Makin, Janelle | | \$25.00 |
| | Contributor address; City; State; Zip Code | | 1 |
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| | Denair, CA 95316 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| Not Employ | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: | | Amount of Contribution (\$) |
| 06/30/2025 | Malczon-Dorris, Alyson | | \$25.00 |
| | Contributor address; City; State; Zip Code | | 1 |
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| | Mansfield, TX 76063 | | [|
| | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| Business Ma | anager | UNT Health Science Ce | enter |
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| The Instru | ction Guide explains how t | o complete this fo | orm. | | Fotal pages Schedule A1: Sch: 123/228 Rpt: 126/272 | |
| 2 FILER NAME | | | | | Filer ID (Ethics Commission F | -ilers) |
| | mes (The Honorable) | | | | 00081913 | |
| 4 Date | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 A | Amount of Contribution (\$) | |
| 06/30/2025 | Maldonado, Paula | | | | | \$25.00 |
| | 6 Contributor address; City; State | e; Zip Code | | | | |
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| | San Antonio, TX 78240 | | | | | |
| 8 Principal occu NP | upation / Job title (See Instructions) | | 9 Employer (See Instructions) Christus | 5) | | |
| Date | Full name of contributor | out-of-state PAC (ID#: |) | A | Amount of Contribution (\$) | |
| 06/30/2025 | Malik, Sarah | _ • • • • • = | | | | \$25.00 |
| | Contributor address; City; State | | | | | • |
| | | | | | | |
| | | | | | | |
| | Minneapolis, MN 55409 | | | | | |
| Principal occu | upation / Job title (See Instructions) | r | Employer (See Instructions | <u> </u> יו | | |
| Digital retail | , | | Nordstrom | >) | | |
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| Date | | out-of-state PAC (ID#: |) | A | Amount of Contribution (\$) | |
| 06/29/2025 | Mann, Denette | | | | | \$50.00 |
| | Contributor address; City; State | | | | | |
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| | | | | | | |
| | Dallas, TX 75229 | | | | | |
| | upation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| Psychothera | 1pist | | Self | | | |
| Date | Full name of contributor | out-of-state PAC (ID#: |) | A | Amount of Contribution (\$) | |
| 06/28/2025 | Mann, Irene | _ | | | | \$15.00 |
| | Contributor address; City; State | e; Zip Code | | | | |
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| | San Antonio, TX 78250 | | | | | |
| Principal occu | upation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| Not Employe | , | | Not Employed | , | | |
| Date | Full name of contributor | | | | Amount of Contribution (\$) | |
| 06/30/2025 | Marburger, Kathleen | out-of-state PAC (ID#: |) | ' | | \$50.00 |
| 00/30/2023 | | | | | | Φ00.00 |
| | Contributor address; City; State | e; Zip Code | | | | |
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| | Austin, TX 78729 | , | | | | |
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| The Instru | uction Guide explains how to complete this f | 1 Total pages Schedule A1: Sch: 124/228 Rpt: 127/272 | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Ja | imes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/23/2025 | | | \$25.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
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| | Austin, TX 78757 | 1 | |
| | upation / Job title (See Instructions) | 9 Employer (See Instructions | 3) |
| Acct Sr | | City of Austin | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | | | \$10.00 |
| | Contributor address; City; State; Zip Code | | |
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| D i dealara | Richmond, TX 77407 | | Į |
| | upation / Job title (See Instructions) | Employer (See Instructions | |
| Operations | - | CCS Presentation Syste | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Marroquin, Samantha | | \$10.00 |
| | Contributor address; City; State; Zip Code | | |
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| | Dishmond TV 77407 | | |
| Dringinglago | Richmond, TX 77407 | | |
| Operations | upation / Job title (See Instructions) | Employer (See Instructions CCS Presentation Syste | |
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| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/23/2025 | Marston, Carson | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Lakeway, TX 78738 | | |
| Principal occ | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> |
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| Date | | | Amount of Contribution (\$) |
| 06/26/2025 | |) | \$25.00 |
| 0012012020 | Contributor address; City; State: Zip Code | | ψ20.00 |
| | Contributor address; City, State, Zip Code | | |
| | | | |
| | Austin, TX 78745 | | |
| Principal occ | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> |
| Not Employ | | Not Employed | <i>''</i> |
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| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | mes (The Honorable) | | | | 00081913 | - |
| 4 | Date | 5 Full name of contributor Out-of-state PAC (II | (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Martin, Barbara | | | | | \$25.00 |
| | i | 6 Contributor address; City; State; Zip Code | | | | | |
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| | I | Austin, TX 78745 | | | | | |
| 8 | Principal occu | upation / Job title (See Instructions) | ć | 9 Employer (See Instructions | ;) | | |
| | Not Employe | ed | | Not Employed | | | |
| F | Date | Full name of contributor out-of-state PAC (II | |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Martinez, Art | | | | | \$5.00 |
| | I | Contributor address; City; State; Zip Code | | | | | |
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| | I | Austin, TX 78759 | | | | | |
| | Principal occu | upation / Job title (See Instructions) | | Employer (See Instructions | ـــــــــــــــــــــــــــــــــــــ | | |
| | Administrato | | | UT System | | | |
| | Date | Full name of contributor out-of-state PAC (II | /ID#· | | — | Amount of Contribution (\$) | |
| | 06/30/2025 | Martinez, Marni | ID# | / | | | \$25.00 |
| | 0010012020 | | | | | | Ψ20.00 |
| | I | Contributor address; City; State; Zip Code | | | | | |
| | I | | | | | | |
| | I | Buda, TX 78610 | | | | | |
| _ | Principal occu | upation / Job title (See Instructions) | <u> </u> | Employer (See Instructions | <u>ا</u> | | |
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| | Date | Full name of contributor out-of-state PAC (II | .[ID#: |) | | Amount of Contribution (\$) | Φ10 00 |
| | 06/30/2025 | Martinez, Ricardo | •••••• | | | | \$10.00 |
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| ┡ | Drinsipal agai | San Antonio, TX 78283 | <u> </u> | Employer (Cool Instructions | Ļ | | |
| | | upation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | CSS | | | Air Force | _ | | |
| | Date | Full name of contributor Out-of-state PAC (II | ID#: |) | | Amount of Contribution (\$) | |
| | 06/29/2025 | Martinez, Stephanie | | | | | \$100.00 |
| | I | Contributor address; City; State; Zip Code | | | | | |
| | I | | | | | | |
| | I | | | | | | |
| | | Katy, TX 77493 | | | | | |
| | Principal occu | upation / Job title (See Instructions) | | Employer (See Instructions | .) | | |
| | Accountant | | | CalvettiFerguson | | | |
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| The Instru | ction Guide explains how to complete this f | orm. | | Total pages Schedule A1: Sch: 126/228 Rpt: 129/272 | 2 |
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| 2 FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| Talarico, Jar | mes (The Honorable) | | | 00081913 | - |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| 06/26/2025 | Martinson, Keith | | | | \$100.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | |
| | Austin, TX 78746 | 1 | | | |
| | upation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| Not Employe | ;d | Not Employed | | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Γ | Amount of Contribution (\$) | |
| 06/25/2025 | Massey, Jason | | | | \$25.00 |
| | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | |
| | | | | | |
| | Round Rock, TX 78664 | | | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| Publications | Supervisor | Accenture | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| 06/30/2025 | Mathis, Jaimee | | | | \$25.00 |
| | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | |
| | | | | | |
| | Houston, TX 77071 | | | | |
| Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| Preschool Te | eacher | Westbury UMC | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) | |
| 06/30/2025 | Mattair, Jimmy | | | | \$12.00 |
| | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | |
| | | | | | |
| | Round Top, TX 78954 | | | | |
| Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| not employe | d | none | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) | |
| 06/28/2025 | McBride, Laura | | | | \$20.00 |
| | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | |
| | | | | | |
| | Burleson, TX 76028 | | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| Pet care reti | red teacher | Laura McBride | | | |
| | | <u> </u> | | | |
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| | The Instruction Guide explains how to complete this form. | | | | 1 | Total pages Schedule A1: Sch: 127/228 Rpt: 130/2 | 272 |
|----------|---|--|-----------------------|---------------------------------|----------|---|-------------|
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commissi | ion Filers) |
| | | mes (The Honorable) | | | | 00081913 | · · |
| 4 | Date | | it-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | McCall, Patricia | | | | | \$50.00 |
| | | 6 Contributor address; City; State; Zip | | | | | |
| | | | | | | | |
| | | Gloucester, MA 01930 | | | | | |
| 8 | Principal occu | upation / Job title (See Instructions) | | 9 Employer (See Instructions) | ;) | | |
| | HR | | | Delix Therapeutics | | | |
| | Date | Full name of contributor out | it-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | McCart, Deborah | | | | | \$25.00 |
| | | Contributor address; City; State; Zip | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Cypress, TX 77433 | | | | | |
| | • | upation / Job title (See Instructions) | | Employer (See Instructions) |) | | |
| | Counselor | | | Self | | | |
| Γ | Date | Full name of contributor | It-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/29/2025 | McCarthy, Peter | | | | | \$10,000.00 |
| | | Contributor address; City; State; Zip | | | | | |
| | | | | | | | |
| | | | | | | | |
| L | | Houston, TX 77006 | | | | | |
| | | upation / Job title (See Instructions) | | Employer (See Instructions) | | | |
| L | Peter McCar | | | Eden Asset Managemer | nt | | |
| | Date | | t-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/29/2025 | | | | | | \$10.00 |
| | | Contributor address; City; State; Zip | p Code | | | | |
| | | | | | | | |
| | | West Lake Hills, TX 78746 | | | | | |
| <u> </u> | Principal occu | upation / Job title (See Instructions) | | Employer (See Instructions) | <u>ا</u> | | |
| | Serenity in th | | | Rhonda McCollough |) | | |
| ⊨ | - | | | , I line and a line concerning. | _ | Amount of Contribution (ft) | |
| | Date 06/28/2025 | Full name of contributor out McCollough, Rhonda | it-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$10.00 |
| | 00/20/2025 | | - 0 | | | | Φ10.00 |
| | Contributor address; City; State; Zip Code | | | | | | |
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| | | West Lake Hills, TX 78746 | | | | | |
| ┢ | Principal occu | I upation / Job title (See Instructions) | | Employer (See Instructions) | ;) | | |
| | Serenity in th | | | Rhonda McCollough | , | | |
| ⊢ | | | L | | | | |
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| The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 128/228 Rpt: 131/272 |
|----------------|---|------------------------------|---|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/30/2025 | McCorquodale, Pat | | \$10.0 |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| | Mason, TX 76856 | | |
| - | ipation / Job title (See Instructions) | 9 Employer (See Instructions | ;) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/26/2025 | McCort, Sean | | \$25.0 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Dallas, TX 75205 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | ;) |
| Teacher | | Uplift Education | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/24/2025 | McCrary, Tammie | | \$10.0 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Orlando, FL 32825 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | \$) |
| Clerical | | CNA | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | McEnroe, Jo | | \$50.0 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Cedar Park, TX 78613 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | McGary, Elizabeth | | \$50.0 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Austin, TX 78734 | | |
| Principal occu | I upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> ;) |
| Manager | | Oracle | , |
| _ | | | |
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| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1: Sch: 129/228 Rpt: 132/272 |
|--|---|
| 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Talarico, James (The Honorable) | 00081913 |
| 4 Date 5 Full name of contributor out-of-state PAC (ID#: |) 7 Amount of Contribution (\$) |
| 06/30/2025 McGinty, Patrick | \$25.00 |
| 6 Contributor address; City; State; Zip Code | |
| | |
| Austin, TX 78723 | |
| | r (See Instructions) |
| Financial Systems Analyst Apple In | |
| | |
| Date Full name of contributor out-of-state PAC (ID#: 06/24/2025 McGough, John | |
| | \$25.00 |
| Contributor address; City; State; Zip Code | |
| | |
| Carrabelle, FL 32322 | |
| | r (See Instructions) |
| John McGough John Mc | |
| | - |
| Date Full name of contributor out-of-state PAC (ID#: |) Amount of Contribution (\$) |
| 06/28/2025 McGuire, Allison | \$25.00 |
| Contributor address; City; State; Zip Code | |
| | |
| Ozona, TX 76943 | |
| | r (See Instructions) |
| Not Employed Not Emp | |
| Date Full name of contributor out-of-state PAC (ID#: |) Amount of Contribution (\$) |
| 06/30/2025 McKenzie, Dawn | \$20.00 |
| Contributor address; City; State; Zip Code | |
| | |
| | |
| Wenatchee, WA 98801 | |
| Principal occupation / Job title (See Instructions) Employer | r (See Instructions) |
| Not employed Not emp | bloyed |
| Date Full name of contributor out-of-state PAC (ID#: |) Amount of Contribution (\$) |
| 06/30/2025 McMeans, Tara | \$20.00 |
| Contributor address; City; State; Zip Code | |
| | |
| | |
| Georgetown, TX 78628 | |
| Principal occupation / Job title (See Instructions) Employer | r (See Instructions) |
| Not Employed Not Emp | bloyed |
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| The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 130/228 Rpt: 133/272 |
|---------------------------|---|---|---|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor Out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) |
| 06/23/2025 | McMeans, Tara | | \$25.00 |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| | Georgetown, TX 78628 | | |
| | ipation / Job title (See Instructions) | 9 Employer (See Instructions | |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | McQuiddy, Lizzy | | \$50.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Maliana TV 75 45 4 | | |
| Dringinal occu | Melissa, TX 75454 | Employer (Soo Instructions | |
| Principal occu Teacher | upation / Job title (See Instructions) | Employer (See Instructions Melissa ISD | 5) |
| | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Mcandrew, Robert | | \$50.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Austin, TX 78717 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/26/2025 | Mcnellie, Myra | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Neersteeber TV 75061 | | |
| Drincinal occu | Nacogdoches, TX 75961 upation / Job title (See Instructions) | Employer (See Instructions | N |
| Not Employe | | Not Employed | 5) |
| | | | Amount of Contribution (\$) |
| Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#: Meadows, Elise |) | Amount of Contribution (\$) \$25.00 |
| 00/00/2020 | Contributor address; City; State; Zip Code | | Ψ20.00 |
| | Continuutor audress, City, State, Zip Code | | |
| | | | |
| | New York, NY 10003 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | ;) |
| Consultant | | Stax | |
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| The Instru | ction Guide explains how to complete this | form. | 1 Total pages Schedule A1: Sch: 131/228 Rpt: 134/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | nes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/26/2025 | Medina, Marie | | \$25.00 |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Midlothian, TX 76065 | | |
| | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) |
| Educator | | Mansfield ISD | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/27/2025 | Meissner, Carol | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Patterson, NY 12563 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/27/2025 | Melton, Suzanne | | \$100.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Murphy, TX 75094 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 6) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: | | Amount of Contribution (\$) |
| 06/30/2025 | Mendez Garcia, Jessica | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Austin, TX 78704 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) |
| Teacher | | AISD | |
| Date | Full name of contributor out-of-state PAC (ID#: | | Amount of Contribution (\$) |
| 06/30/2025 | Messner, Emily | | \$5.00 |
| | Contributor address; City; State; Zip Code | | |
| | · · · · · · · · · · · · · · · · · · · | | |
| | | | |
| | Arlington, VA 22209 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) |
| Small-busine | | Self | |
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| 6 Contributor address; City; State; Zip Code Lott, TX 76656 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#;) Amount of Contribution (\$) 06/28/2025 Michaelsen, Hedrich \$ Austin, TX 78757 Employer (See Instructions) Not Employed Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#;) Amount of Contribution (\$) 06/27/2025 Michel, Milo \$ \$ Of/27/2025 Michel, Milo \$ Contributor address; City; State; Zip Code \$ \$ San Marcos, TX 78666 Employer (See Instructions) Not Employed \$ Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed \$ Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed \$ Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed \$ <th>ot: 135/272 Commission Filers) ution (\$) \$25.00 ution (\$) \$25.00</th> | ot: 135/272 Commission Filers) ution (\$) \$25.00 ution (\$) \$25.00 |
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| Talarico, James (The Honorable) 00081913 4 Date 5 Full name of contributor out-of-state PAC (ID#: | ution (\$) \$25.00 ution (\$) \$25.00 ution (\$) |
| Talarico, James (The Honorable) 00081913 4 Date 5 Full name of contributor out-of-state PAC (ID#: | ution (\$) \$25.00 ution (\$) \$25.00 ution (\$) |
| 06/29/2025 Michaels, Sara | \$25.00 ution (\$) \$25.00 ution (\$) |
| 6 Contributor address; City; State; Zip Code Lott, TX 76656 Lott, TX 76656 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Michaelsen, Hedrich Amount of Contribution (\$) 06/28/2025 Full name of contributor out-of-state PAC (ID#:) Austin, TX 78757 Amount of Contributions) Not Employed Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Michel, Milo Amount of Contribution (\$) 06/27/2025 Full name of contributor out-of-state PAC (ID#:) Michel, Milo Amount of Contribution (\$) 06/27/2025 Michel, Milo Amount of Contribution (\$) 06/27/2025 Michel, Milo Amount of Contribution (\$) San Marcos, TX 78666 Employer (See Instructions) Not Employed Employer (See Instructions) Not Employed Pate Full name of contributor out-of-state PAC (ID#: | ution (\$) \$25.00 |
| 6 Contributor address; City; State; Zip Code Image: Contributor address; City; State; Zip Code 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/28/2025 Michaelsen, Hedrich | \$25.00 ution (\$) |
| 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/28/2025 Michaelsen, Hedrich Contributor address; City; State; Zip Code Austin, TX 78757 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Not Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Not Employed Amount of Contribution (\$) San Marcos, TX 78666 Employer (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) | \$25.00 ution (\$) |
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| 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/28/2025 Michaelsen, Hedrich Amount of Contribution (\$) 06/28/2025 Michaelsen, Hedrich Contributor address; City; State; Zip Code Austin, TX 78757 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/27/2025 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/27/2025 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) San Marcos, TX 78666 Employer (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributio | \$25.00 ution (\$) |
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| Contributor address; City; State; Zip Code Austin, TX 78757 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor □ out-of-state PAC (ID#:) Michel, Milo Amount of Contribution (\$) 06/27/2025 Full name of contributor address; City; State; Zip Code Amount of Contribution (\$) San Marcos, TX 78666 Employer (See Instructions) Not Employed Employer (See Instructions) Not Employed Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) | ution (\$) |
| Austin, TX 78757 Employer (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Michel, Milo Amount of Contribution (\$) 06/27/2025 Michel, Milo s Contributor address; City; State; Zip Code Amount of Contribution (\$) San Marcos, TX 78666 Employer (See Instructions) Not Employed Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Not Employed | |
| Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Michel, Milo Michel, Milo \$ Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code Amount of Contributor Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) | |
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| Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/27/2025 Michel, Milo \$ Contributor address; City; State; Zip Code \$ San Marcos, TX 78666 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Full name of contributor Date Full name of contributor | |
| Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/27/2025 Michel, Milo | |
| 06/27/2025 Michel, Milo \$ Contributor address; City; State; Zip Code \$ San Marcos, TX 78666 \$ Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) | |
| Contributor address; City; State; Zip Code San Marcos, TX 78666 Principal occupation / Job title (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) | \$50.00 |
| San Marcos, TX 78666 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) | |
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| Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) | |
| Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) | |
| Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) | |
| | |
| | ution (\$) |
| | \$10.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Brush Prairie, WA 98606 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| Dir. of Communications Veritas Technologies LLC | |
| Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) | |
| 06/30/2025 Michener, Dan \$ | ution (\$) |
| Contributor address; City; State; Zip Code | ution (\$) \$25.00 |
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| | |
| Austin, TX 78739 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
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| The Instrue | ction Guide explains how to c | complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 133/228 Rpt: 136/27 | 72 |
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| 2 FILER NAME | | | | 3 | Filer ID (Ethics Commissio | on Filers) |
| | nes (The Honorable) | | | | 00081913 | , |
| 4 Date | Date 5 Full name of contributor out-of-state PAC (ID#:) | | 7 | Amount of Contribution (\$) | | |
| 06/30/2025 | Miles, Beth | | | | | \$50.00 |
| | 6 Contributor address; City; State; Z | Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | Desoto, TX 75115 | | | | | |
| | pation / Job title (See Instructions) | 9 | B Employer (See Instructions | 5) | | |
| Not Employe | ⁱ d | | Not Employed | | | |
| Date | Full name of contributor | ut-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| 06/29/2025 | Miller, Inger | | | | | \$1,000.00 |
| | Contributor address; City; State; Z | | | | | |
| | | | | | | |
| | | | | | | |
| | Colleyville, TX 76034 | | | | | |
| | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| Not Employe | d | | Not Employed | | | |
| Date | Full name of contributor | ut-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| 06/26/2025 | Miller, Inger | | | | | \$1,000.00 |
| | Contributor address; City; State; Z | | | | | |
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| | - " " | | | | | |
| | Colleyville, TX 76034 | | | | | |
| | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| Not Employe | .d | | Not Employed | | | |
| Date | | ut-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| 06/23/2025 | Miller, Josh | | | | | \$50.00 |
| | Contributor address; City; State; Z | Zip Code | | | | |
| | | | | | | |
| | Hutto, TX 78634 | | | | | |
| Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> ;) | | |
| Construction | | | TriPointe Homes | , | | |
| Date | Full name of contributor | ut-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| 06/25/2025 | Miller, Kent | יטו-טו-זומופ רחס (ושיי | | | | \$10.00 |
| 00.20.202 | Contributor address; City; State; Zi | in Code | | | | *= *···· |
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| | | | | | | |
| | New Braunfels, TX 78130 | | | | | |
| Principal occu | I pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| Not Employe | | | Not Employed | | | |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 134/228 Rpt: 137/272 | |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission I | Filers) |
| | | mes (The Honorable) | | | 00081913 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| | 06/28/2025 | Miller, Marcia | | | | \$20.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | New York, NY 10023 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Not Employe | | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ |) | Γ | Amount of Contribution (\$) | |
| | 06/23/2025 | Miller Hemm, Sam | | | , and an elimination (| \$25.00 |
| | •••• | | | \mathbf{I} | | |
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| | | | | | | |
| | | Spicewood, TX 78669 | | | | |
| | Principal occu | I ipation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Teacher | | Manor ISD | | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ |) | Γ | Amount of Contribution (\$) | |
| | 06/25/2025 | Milner, Christie | | | · · · · · · · · · · · · · · · · · · · | \$50.00 |
| | | Contributor address; City; State; Zip Code | | { | | |
| | | | | | | |
| | | | | | | |
| | | Houston, TX 77096 | | $\left \right _{}$ | | |
| | Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Foreign Serv | /ice Officer | Department of State | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Miramontes, Laura | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Frisco, TX 75033 | | | | |
| | | ipation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | ;d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Mittel, Elaine | | | | \$20.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | | |
| | | Liberty Hill, TX 78642 | | | | |
| | | ipation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | ;d | Not Employed | | | |
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| The Instruc | ction Guide explains how | to complete this fc | orm. | 1 | otal pages Schedule A1: ich: 135/228 Rpt: 138/27 | 72 |
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| 2 FILER NAME | | | | | iler ID (Ethics Commissio | |
| | nes (The Honorable) | | | 1 | 0081913 | , , , , , , , , , , , , , , , , , , , |
| 4 Date | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 A | mount of Contribution (\$) | |
| 06/27/2025 | Mixon, Jeanne | | | | | \$25.00 |
| | 6 Contributor address; City; Sta | ate; Zip Code | | 1 | | |
| | | | | | | |
| | Pflugerville, TX 78660 | | | | | |
| | pation / Job title (See Instructions) | | 9 Employer (See Instructions | s) | | |
| lunch aide / c | crossing guard | | Millburn Township | | | |
| Date | Full name of contributor | out-of-state PAC (ID#: |) | A | mount of Contribution (\$) | |
| 06/25/2025 | - Miziolek, Aleksandra | — | | | | \$250.00 |
| | Contributor address; City; Sta | | | 1 | | |
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| | | | | | | |
| | Grosse Pointe Farms, MI 4 | 8236 | | | | |
| Principal occur | pation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
| Lawyer | | | Cooper standard Autom | notive | | |
| Date | Full name of contributor | out-of-state PAC (ID#: |) | A | mount of Contribution (\$) | |
| 06/30/2025 | - Mnaymneh, Hala | — | | | | \$3,500.00 |
| | Contributor address; City; Sta | ate; Zip Code | | • | | |
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| | | | | | | |
| | Coral Gables, FL 33143 | | | | | |
| | pation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
| Not Employe | .d | | Not Employed | | | |
| Date | Full name of contributor | out-of-state PAC (ID#: |) | A | mount of Contribution (\$) | |
| 06/26/2025 | Moldenhauer, Sheila | | | | | \$25.00 |
| | Contributor address; City; Sta | ate; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | Round Rock, TX 78664 | | | | | |
| | pation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
| Not Employe | d | | Not Employed | | | |
| Date | Full name of contributor | out-of-state PAC (ID#: |) | A | mount of Contribution (\$) | |
| 06/30/2025 | Molina, Ana | | | | | \$10.00 |
| | Contributor address; City; Sta | | | 1 | | |
| | | | | | | |
| | | | | | | |
| | Missouri City, TX 77459 | r | | | | |
| | pation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
| Paraprofessi | onal | | FBISD | | | |
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| The Instru | iction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 136/228 Rpt: 139/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jai | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) |
| 06/29/2025 | | | \$50.00 |
| | 6 Contributor address; City; State; Zip Code | | |
| | Arlington, TX 76013 | | |
| | upation / Job title (See Instructions) | 9 Employer (See Instructions | 3) |
| Not Employe | | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | Montano, Lara | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Contro Viollovi CA 04E46 | | |
| Dringing ago | Castro Valley, CA 94546 upation / Job title (See Instructions) | Employer (Soo Instructions | |
| Database A | , | Employer (See Instructions Sutter Health | ;) |
| | | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | Moore, Daniel | | \$50.00 |
| | Contributor address; City; State; Zip Code | | |
| | Austin, TX 78756 | | |
| - | upation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Systems En | gineer | Texas Mutual | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/25/2025 | Moore, Jacob | | \$10.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Austin, TX 78748 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | \$) |
| Higher ed a | dmin | UT Austin | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Moore, Kimberly | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Yantis, TX 75497 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Not Employe | ed | Not Employed | |
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| The Instru | iction Guide explains hov | v to complete this f | form. | 1 | Total pages Schedule A1: Sch: 137/228 Rpt: 140/272 | 2 |
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| 2 FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| Talarico, Jar | mes (The Honorable) | | | | 00081913 | - |
| 4 Date | 5 Full name of contributor | out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| 06/30/2025 | , . , | | | | | \$10.00 |
| | 6 Contributor address; City; S | State; Zip Code | | 1 | | |
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| | | | | | | |
| | Kyle, TX 78640 | | | | | |
| | upation / Job title (See Instructions | 3) | 9 Employer (See Instructions) | 5) | | |
| Learning & i | Development Specialist | | Silicon Labs | | | |
| Date | Date Full name of contributor out-of-state PAC (ID#:) | | |] | Amount of Contribution (\$) | |
| 06/30/2025 | Morgan, Elizabeth | | | | | \$25.00 |
| | Contributor address; City; S | tate; Zip Code | | | | |
| | | | | | | |
| | Auctin TX 79725 | | | | | |
| Drincipal occu | Austin, TX 78725 | ~ | Employer (See Instructions | <u> </u> | | |
| Principal occu Program Dir | | 3) | UT Austin | 5) | | |
| | | <u> </u> | | 1 | | |
| Date | Full name of contributor | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | Φ100 00 |
| 06/30/2025 | | Nata Zin Cada | | | | \$100.00 |
| | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | |
| | Houston, TX 77035 | | | | | |
| Principal occl | Principal occupation / Job title (See Instructions) Employer (See Instructions | | 5) | | | |
| Not Employe | ed | | Not Employed | | | |
| Date | Full name of contributor | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| 06/30/2025 | Morquecho, Teri | | | | | \$25.00 |
| | Contributor address; City; S | State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | Richardson, TX 75082 | | | | | |
| | upation / Job title (See Instructions | s) | Employer (See Instructions | 5) | | |
| Not Employe | ed | | Not Employed | | | |
| Date | Full name of contributor | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| 06/30/2025 | Morris, Rob | | | | | \$25.00 |
| | Contributor address; City; S | tate; Zip Code | | 1 | | |
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| | | | | | | |
| | Los Angeles, CA 90012 | | | Ĺ | | |
| - | upation / Job title (See Instructions | 3) | Employer (See Instructions | 5) | | |
| Producer | | | Sharp Entertainment | | | |
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| The Instru | uction Guide explains how to complete this f | form. | 1 Total pages Schedule A1: Sch: 138/228 Rpt: 141/272 |
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| 2 FILER NAMI | Ē | | 3 Filer ID (Ethics Commission Filers) |
| | ames (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/25/2025 | Morrison, Mark | | \$25.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | Bulverde, TX 78163 | | |
| | cupation / Job title (See Instructions) | 9 Employer (See Instructions | 5) |
| Not Employ | /ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: | ·) | Amount of Contribution (\$) |
| 06/30/2025 | | | \$100.00 |
| | Contributor address; City; State; Zip Code | | 1 |
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| | Austin, TX 78704 | | |
| | supation / Job title (See Instructions) | Employer (See Instructions | 5) |
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| Date | Full name of contributor out-of-state PAC (ID#: | ·) | Amount of Contribution (\$) |
| 06/27/2025 | | | \$25.00 |
| | Contributor address; City; State; Zip Code | | 1 |
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| | | | |
| | Carrollton, TX 75007 | | |
| | cupation / Job title (See Instructions) | Employer (See Instructions | s) |
| Not Employ | /ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/26/2025 | Mossman, Nancy | | \$50.00 |
| | Contributor address; City; State; Zip Code | | 1 |
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| D i destas | Austin, TX 78759 | | ļ |
| | cupation / Job title (See Instructions) | Employer (See Instructions | |
| minister | | PResbytieran Children's | 1 |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/25/2025 | Mosty, Dubs | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
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| | | | |
| B i destas | Austin, TX 78752 | | |
| | cupation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Not Employ | /ed | Not Employed | |
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| | The Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 139/228 Rpt: 142/272 | |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Talarico, Jar | nes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Motley, Mary K | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | San Antonio, TX 78209 | | | | |
| 8 | | pation / Job title (See Instructions) | 9 Employer (See Instructions | S) | | |
| | Teacher | | AHISD | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/28/2025 | Mueller, Ernest | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Round Rock, TX 78681 | | | | |
| ⊢ | Princinal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u></u> | | |
| | Technology | | Accenture | 5) | | |
| ╞ | Date | | | Т | Amount of Contribution (\$) | |
| | 06/26/2025 | Full name of contributor out-of-state PAC (ID#: Muramoto, Hommin |) | | | \$25.00 |
| | 00/20/2020 | Contributor address; City; State; Zip Code | | | | ¢20.00 |
| | | contributor address, city, state, zip code | | | | |
| | | | | | | |
| | | Watsonville, CA 95076 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) | |
| | 06/23/2025 | Murdock, Linda | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Dude TV 70010 | | | | |
| | Drineireleeeu | Buda, TX 78610 | Employer (Coolingtruction | | | |
| | Not Employe | pation / Job title (See Instructions) | Employer (See Instructions Not Employed | S) | | |
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| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | ¢50.00 |
| | 06/30/2025 | Murphy, Madison | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Houston, TX 77055 | | | | |
| - | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Not Employe | | Not Employed | | | |
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| The Inst | ruction Guide explains how to complete th | his form. | 1 Total pages Schedule A1: Sch: 140/228 Rpt: 143/272 |
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| 2 FILER NAM | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, | James (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC | (ID#:) | 7 Amount of Contribution (\$) |
| 06/30/202 | | | \$25.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
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| | Frisco, TX 75035 | | |
| | ccupation / Job title (See Instructions) | 9 Employer (See Instructions | 5) |
| Not Emple | oyed | Not Employed | |
| Date | — | (ID#:) | Amount of Contribution (\$) |
| 06/30/202 | 5 Nakamura, Caroline | | \$500.00 |
| | Contributor address; City; State; Zip Code | |] |
| | | | |
| | Houston TV 77010 | | |
| Drincipal o | Houston, TX 77018 ccupation / Job title (See Instructions) | Employer (See Instructions | ~\ |
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| | | | Amount of Contribution (\$) |
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| 00/30/202 | | | ψ23.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | San Antonio, TX 78248 | | |
| Principal o | ccupation / Job title (See Instructions) | Employer (See Instructions | 5) |
| Social wo | rker | US Army | |
| Date | Full name of contributor out-of-state PAC | (ID#:) | Amount of Contribution (\$) |
| 06/29/202 | 5 Napolitano, Joseph | | \$25.00 |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | Victoria TV 77001 | | |
| Principal o | Victoria, TX 77901 ccupation / Job title (See Instructions) | Employer (See Instructions | ~\ |
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| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Victoria, TX 77901 | | |
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| | The Instru | ction Guide explains how | to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 141/228 Rpt: 144/272 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission F | Filers) |
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| 4 | | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/29/2025 | Nations, Julia | | | | | \$10.00 |
| | | 6 Contributor address; City; Sta | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 1 | | |
| | l | | | | | | |
| | I | | | | | | |
| _ | | Cedar Park, TX 78613 | | | Ĺ | | |
| 8 | | pation / Job title (See Instructions) | | 9 Employer (See Instructions | 3) | | |
| | Not Employe | |] | Not Employed | — | | |
| | Date | - | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/28/2025 | Navarra, Brittany | | | | | \$7.00 |
| | 1 | Contributor address; City; Sta | | , | 1 | | |
| | I | | | | | | |
| | I | | | | | | |
| | | San Antonio, TX 78222 | | | | | |
| | Principal occupation / Job title (See Instructions) Employer (See Instructions | | | 5) | | | |
| | Third party re | elationship manager | | Usaa | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/25/2025 | Navarre, Dee | _ | | | | \$10.00 |
| | 1 | Contributor address; City; Sta | ate; Zip Code | | 1 | | |
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| | l | Winnie, TX 77665 | | | | | |
| | Principal occu | pation / Job title (See Instructions) |) | Employer (See Instructions | 5) | | |
| | Not Employe | ed . | | Not Employed | | | |
| ╞ | Date | Full name of contributor | out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Neal, Patricia | | | | | \$25.00 |
| | I | Contributor address; City; Sta | ate; Zip Code | | ł | | |
| | I | | | | | | |
| | l | | | | | | |
| | | Grapevine, TX 76051 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | , | Employer (See Instructions | 5) | | |
| | Not Employe | ed . | | Not Employed | | | |
| ╞ | Date | Full name of contributor | out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Neary, Lisa | - | | | | \$25.00 |
| | l | Contributor address; City; Sta | ate: Zip Code | | 1 | | |
| | I | | | | | | |
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| | I | Plano, TX 75075 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | , | Employer (See Instructions | ـــــــــــــــــــــــــــــــــــــ | | |
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| | The Instru | ction Guide explains how to complete th | is form. | 1 | Total pages Schedule A1: Sch: 142/228 Rpt: 145/272 | |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | nes (The Honorable) | | | 00081913 | / |
| 4 | Date | 5 Full name of contributor out-of-state PAC (I | D#:) | 7 | Amount of Contribution (\$) | |
| | 06/29/2025 | Neas, Rose | | | | \$12.50 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Austin, TX 78705 | | | | |
| 8 | Principal occu | I pation / Job title (See Instructions) | 9 Employer (See Instruction | I IS) | | |
| | Sales | | Gigamon | -, | | |
| | Date | Full name of contributor Out-of-state PAC (| | Т | Amount of Contribution (\$) | |
| | 06/25/2025 | Neatherlin, Deborah | D#:) | | | \$25.00 |
| | 00/23/2023 | | | | | Ψ23.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Tuscola, TX 79562 | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instruction | l IS) | | |
| | Not employe | | Not employed | -) | | |
| ⊨ | Date | | | Т | Amount of Contribution (\$) | |
| | 06/25/2025 | Full name of contributor out-of-state PAC (I Nelson, Leslie | D#) | | | \$100.00 |
| | 00/20/2020 | | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Seattle, WA 98116 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instruction | is) | | |
| | Developer | | Expeditors | | | |
| ⊨ | Date | Full name of contributor out-of-state PAC (I | D#:) | Т | Amount of Contribution (\$) | |
| | 06/26/2025 | Nesmith, Rebecca | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | • | | |
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| | | | | | | |
| | | Houston, TX 77057 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instruction | is) | | |
| | Not Employe | d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (I | D#:) | Τ | Amount of Contribution (\$) | |
| | 06/30/2025 | Newman, Mary | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Merced, CA 95340 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instruction | is) | | |
| | Not employe | d | Not employed | | | |
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| The Instruction Guide explains how to complete this form. 2 FILER NAME Talarico, James (The Honorable) | 1 Total pages Schedule A1: Sch: 143/228 Rpt: 146/272 |
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| Talarico, James (The Honorable) 4 Date 5 Full name of contributor i out-of-state PAC (ID#:) | |
| Talarico, James (The Honorable) 4 Date 5 Full name of contributor i out-of-state PAC (ID#:) | 3 Filer ID (Ethics Commission Filers) |
| | 00081913 |
| 06/30/2025 Nauven Kathy | 7 Amount of Contribution (\$) |
| | \$5.00 |
| 6 Contributor address; City; State; Zip Code | |
| | |
| Bothell, WA 98012 | |
| 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) | |
| Program Ops. Specialist University of Washington | l . |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/23/2025 Nichols, Joey | \$50.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Lubbock, TX 79424 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/30/2025 Nichols, Karrison | \$25.00 |
| Contributor address; City; State; Zip Code | |
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| Dallas, TX 75201 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/23/2025 Nicholson, Arthur | \$124.00 |
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| Contributor address; City; State; Zip Code | |
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| Contributor address; City; State; Zip Code | |
| Contributor address; City; State; Zip Code San Antonio, TX 78204 | |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission F | -ilers) |
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| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Nissley, Lauren | | | | \$50.00 |
| | ļ | 6 Contributor address; City; State; Zip Code | |] | | |
| | ļ | 1 | ļ | | | |
| | | Pittsburgh, PA 15214 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions) | s) | | |
| | Florist | , | Lauren Nissley | | | |
| - | Date | Full name of contributor out-of-state PAC (ID#: |) | $\overline{\Box}$ | Amount of Contribution (\$) | |
| | 06/23/2025 | Norman, Gerri | I | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
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| | | Fredericksburg, TX 78624 | | | | |
| | | ipation / Job title (See Instructions) | Employer (See Instructions) | s) | | |
| _ | Nurse | | MHDD | _ | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Norouzi, Sanaz | | | | \$25.00 |
| | 1 | Contributor address; City; State; Zip Code | |] | | |
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| | ļ | Houston, TX 77055 | ļ | | | |
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| | Engineer | | BASF | 3) | | |
| _ | Date | Full name of contributor Out-of-state PAC (ID#: | | ᆕ | Amount of Contribution (\$) | |
| | 06/30/2025 | Full name of contributor out-of-state PAC (ID#: Norris-Lane, Gini | / | | | \$25.00 |
| | 00/00/2020 | Contributor address; City; State; Zip Code | | | | Ψ20.00 |
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| | ļ | Kerrville, TX 78028 | ļ | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) | s) | | |
| | Pastor | , | Schreiner University | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | <u></u> |
| | 06/26/2025 | Norwood, Angelique | ļ | | | \$25.00 |
| | 1 | Contributor address; City; State; Zip Code | | 1 | | |
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| | | Ocoee, FL 34761 | ! | | | |
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| | Nurse Anest | nesiologist | Self | | | |
| | | Contributor address; City; State; Zip Code Ocoee, FL 34761 Ipation / Job title (See Instructions) | Employer (See Instructions) | | | - |

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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | ו Filers) |
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| 4 | Date | 5 Full name of contributor out-of-state PAC | C (ID#:) | 7 | Amount of Contribution (\$) | |
| | 06/26/2025 | Nowlin, Jan | | | | \$200.00 |
| | | 6 Contributor address; City; State; Zip Code | | " | | |
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| | | Georgetown, TX 78628 | | | | |
| 8 | Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instruction | <u> </u> າຣ) | | |
| - | Not Employe | | Not Employed | , | | |
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| | 06/29/2025 | O'Kain, William & Betty | (ID#) | | | \$25.00 |
| | 00,20,222 | | | | | += |
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| | | Boerne, TX 78006 | | | | |
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| | Not Employe | ed | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC | (ID#:) | | Amount of Contribution (\$) | |
| | 06/30/2025 | OBrien, Kari | · | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
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| | | | | | | |
| | | Mckinney, TX 75072 | | | | |
| | - | upation / Job title (See Instructions) | Employer (See Instruction | ıs) | | |
| | Teacher | | McKinney ISD | | | |
| | Date | | C (ID#:) | | Amount of Contribution (\$) | _ |
| | 06/25/2025 | ODonnell, Joseph | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Buffalo, NY 14224 | | | | |
| | Principal occu | ipation / Job title (See Instructions) | Employer (See Instruction | <u> </u> | | |
| | Director | | Strategic Financial Solu | | \$ | |
| | | Full name of contributor | | | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC Ochoa, Marcela | ; (ID#:) | | Amount of Contribution (\$) | \$10.00 |
| | 00/30/2023 | | | | | Φ10.00 |
| | | Contributor address; City; State; Zip Code | | | | |
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| | | Portland, OR 97201 | | | | |
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| Talarico, James (The Honorable) 00081913 | _ | | | 1 Total pages Schedule A1: |
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| Talarico, James (The Honorable) 00081913 4 Date 5 Full name of contributor inducer and tess; City: State, Zip Code 7 Amount of Contribution (\$) 6 Contributor address; City: State, Zip Code 7 Amount of Contribution (\$) 9 Employer (See Instructions) 7 Attorney 9 Employer (See Instructions) 9 Employer (See Instructions) 7 Amount of Contribution (\$) 7 Oddr Oddr, Glynnis 0 out-of-state PAC (0.0* Amount of Contribution (\$) 7 Oddr Oddr, Glynnis 0 out-of-state PAC (0.0* Amount of Contribution (\$) 7 Oddr, Glynnis Contributor address; City: State; Zip Code Amount of Contribution (\$) \$ \$25.00 8 Principal occupation / Job tite (See Instructions) Not Employed Amount of Contribution (\$) \$ \$25.00 9 Oddr Ogundele; Otolade Out-of-state PAC (0.0* Amount of Contribution (\$) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | The Instructi | on Guide explains how to complete this f | orm. | Sch: 146/228 Rpt: 149/272 |
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| 06/25/2025 Ochoa, Omar \$500.00 6 Contributor address; City; State; Zip Code Stopper (See Instructions) Attorney 9 Employer (See Instructions) Attorney Odda, Giynnis Omar Ochoa Law Firm PC Date Oddom, Giynnis Omar Ochoa Law Firm PC Odda Oddom, Giynnis Amount of Contribution (\$) \$25.00 Contributor address; City; State; Zip Code Full name of contributor auc-of-state PAC (ID# | Talarico, James | s (The Honorable) | | 00081913 |
| 6 Contributor address; City; State: 2ip Code Mcallen, TX 78501 Perployer (See Instructions) Attorney Omar Ochoa Law Firm PC Date Odom, Glymis out-of-state PAC (IDI:) 06/29/2025 Odom, Glymis out-of-state PAC (IDI:) Principal occupation / Job title (See Instructions) Contributor address; City; State: 2ip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Not Employed Full name of contributor out-of-state PAC (IDI: | | |) | |
| 6 Contributor address; City; State; Zip Code Mcallen, TX 78501 9 8 Principal occupation / Job title (See Instructions) Attorney 0 Date 06/29/2025 Full name of contributor Odom, Glynnis 0 Contributor address; City; State; Zip Code Round Rock, TX 78681 Amount of Contribution(\$) Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date 06/30/2025 Full name of contributor Ogundele, Ciolade out-of-state PAC (top: Contributor address; City; State; Zip Code Spring, TX 77389 Employer (See Instructions) Not Employed Amount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Contributor address; City; State; Zip Code Austin, TX 78753 Employer (See Instructions) St. A's Amount of Contribution (\$) \$25.00 Date 06/28/2025 Full name of contributor Olson, Elizabeth Contributor address; City; State; Zip Code Henderson, TX 75552 Amount of Contribution (\$) \$25.00 \$25.00 | | | | \$500. |
| 8 Principal occupation / Job title (See Instructions) Attorney 9 Employer (See Instructions) Omar Ochoa Law Firm PC Date 06/29/2025 Full name of contributor Odom, Giynnis out-of-state PAC (Dot Contributor address; City; State; Zip Code Amount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) \$25.00 Date 06/30/2025 Full name of contributor Ogundele, Ololade Spring, TX 77389 Out-of-state PAC (Dot Contributor address; City; State; Zip Code Amount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) \$25.00 Date 06/27/2025 Full name of contributor Otson, Destiny Out-of-state PAC (Dot Date Amount of Contribution (\$) \$25.00 Ofice Instructions) Contributor address; City; State; Zip Code Amount of Contribution (\$) \$25.00 \$25.00 Date 06/28/2025 Full name of contributor Contributor address; City; State; Zip Code Amount of Contribution (\$) \$25.00 Date 06/28/2025 Full name of contributor Contributor address; City; State; Zip Code Amount of Contribution (\$) \$25.00 | 6 | Contributor address; City; State; Zip Code | | |
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| Contributor address; City; State; Zip Code Round Rock, TX 78681 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date 06/30/2025 Full name of contributor out-of-state PAC (Doff) Ogundele, Ololade Amount of Contribution (\$) \$25.00 Contributor address; City; State; Zip Code Spring, TX 77389 Employer (See Instructions) Not Employed Amount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) \$25.00 Oate 06/271/2025 Full name of contributor out-of-state PAC (ID#:) Austin, TX 78753 Amount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Church Admin Employer (See Instructions) St. A's Amount of Contribution (\$) \$25.00 Date 06/28/2025 Full name of contributor out-of-state PAC (ID#:) Austin, TX 78753 Amount of Contribution (\$) \$25.00 Date 06/28/2025 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$25.00 Amount of Contribution (\$) \$25.00 Date 06/28/2025 Full name of contributor out-of-state PAC (ID#:) Contributor address; City; State; Zip Code Henderson, TX 75652 Amount of Contribution (\$) \$25.00 | Date | |) | Amount of Contribution (\$) |
| Round Rock, TX 78681 Employer (See Instructions) Not Employed Employer (See Instructions) Not Employed Date 06/30/2025 Full name of contributor or out-of-state PAC (D#:) Ogundele, Ololade Amount of Contribution (\$) Spring, TX 77389 Amount of Contribution (\$) Spring, TX 77389 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) Spring, TX 77389 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) Spring, TX 77389 Date 06/271/2025 Full name of contributor or out-of-state PAC (ID#:) Olson, Destiny Amount of Contribution (\$) Sprincipal occupation / Job title (See Instructions) Contributor address; City, State; Zip Code Amount of Contribution (\$) St. A's Date 06/28/2025 Full name of contributor or out-of-state PAC (ID#:) Olson, Elizabeth Employer (See Instructions) St. A's Date 06/28/2025 Full name of contributor or out-of-state PAC (ID#:) Olson, Elizabeth Amount of Contribution (\$) St. A's Date 06/28/2025 Full name of contributor or out-of-state PAC (ID#:) Olson, Elizabeth Amount of Contribution (\$) St. A's Date 06/28/2025 Full name of contributor or out-of-state PAC (ID#:) Olson, Elizabeth Amount of Contribution (\$) St. A's Principal occupation / Job title (See Instructions) <td< td=""><td>06/29/2025</td><td></td><td></td><td>\$25.</td></td<> | 06/29/2025 | | | \$25. |
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| Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date 06/30/2025 Full name of contributor out-of-state PAC (ID#: | | Round Rock. TX 78681 | | |
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| 06/27/2025 Olson, Destiny \$25.00 Contributor address; City; State; Zip Code Austin, TX 78753 Principal occupation / Job title (See Instructions) Employer (See Instructions) Church Admin St. A's Date Full name of contributor out-of-state PAC (ID#:) O6/28/2025 Olson, Elizabeth Amount of Contribution (\$) Contributor address; City; State; Zip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) | | Full name of contributor Out-of-state PAC (ID#: | | Amount of Contribution (\$) |
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| Farm manager KI | | | | 3) |
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| | The Instru | ction Guide explains how to co | omplete this for | m. | 1 | Total pages Schedule A1: Sch: 147/228 Rpt: 150/272 | 2 |
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| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Talarico, Jar | mes (The Honorable) | | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out- | ut-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Onstad, Jo-El | | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip | | | | | |
| | | | | | | | |
| | | Seguin, TX 78155 | | | | | |
| 8 | Principal occu | upation / Job title (See Instructions) | 9 | Employer (See Instructions | ;) | | |
| | Not Employe | | | Not Employed | , | | |
| ╞ | Date | | I | | | Amount of Contribution (\$) | |
| | 06/25/2025 | Opperman, Anne | | , | | | \$25.00 |
| | | Contributor address; City; State; Zip | ip Code | | | | |
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| | | | | | | | |
| | | Wichita Falls, TX 76310 | | | | | |
| | | upation / Job title (See Instructions) | | Employer (See Instructions | 3) | | |
| | Not Employe | ed | | Not Employed | | | |
| | Date | Full name of contributor | ut-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Orchard, Phillip | | | | | \$100.00 |
| | | Contributor address; City; State; Zip | p Code | | | | |
| | | | | | | | |
| | | Austin, TX 78721 | | | | | |
| <u> </u> | Principal occu | Ipation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | Specialisr | | | Meta | 9 | | |
| - | Date | Full name of contributor | ut-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/24/2025 | Orkun, Maria | 1-01-State FAC (10# | / | | | \$25.00 |
| | 00/2 112022 | Contributor address; City; State; Zip | in Code | | | | Ψ=0.02 |
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| | | Round Rock, TX 78681 | | | | | |
| \square | | upation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Special Proj | ects Manager | | TIADA | | | |
| F | Date | Full name of contributor | ut-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/27/2025 | Osterloh, Curtis | | | | | \$500.00 |
| | | Contributor address; City; State; Zip | p Code | | | | |
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| | | Austin TV 70701 | | | | | |
| ┡ | Dringing oog | Austin, TX 78701 | | Employer (Cap Instructions | Ĺ | | |
| | Principal occu Lawyer | upation / Job title (See Instructions) | | Employer (See Instructions Scott Douglass McConn | | N N | |
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| The Instru | ction Guide explains how | v to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 148/228 Rpt: 151/272 | 2 |
| 2 FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | mes (The Honorable) | | | | 00081913 | , |
| 4 Date | 5 Full name of contributor | out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| 06/23/2025 | Othman, Ali | | | | | \$5.00 |
| | 6 Contributor address; City; St | tate; Zip Code | | | | |
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| | | | | | | |
| | Bremerton, WA 98312 | | | | | |
| 8 Principal occu | pation / Job title (See Instructions | 5) | 9 Employer (See Instructions | 5) | | |
| Software En | gineer | | Washington State | | | |
| Date | Full name of contributor | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| 06/30/2025 | Overcashier, Lee | | | | | \$25.00 |
| | Contributor address; City; Si | | | | | |
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| | Fombell, PA 16123 | | | | | |
| Principal occu | I upation / Job title (See Instructions | 5) | Employer (See Instructions | <u> </u> 5) | | |
| Analyst | | - / | Diageo | , | | |
| Date | Full name of contributor | | , , | | Amount of Contribution (\$) | |
| 06/29/2025 | Owens, Marci | out-of-state PAC (ID#:_ |) | | | \$70.00 |
| 00/29/2025 | | | | | | Φ10.00 |
| | Contributor address; City; Si | tate; Zip Code | | | | |
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| | Plainview, TX 79072 | | | | | |
| Bringinal occu | pation / Job title (See Instructions | -) | Employer (See Instructions | <u> </u> | | |
| Not Employe | | 5) | Not Employed |) | | |
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| Date | Full name of contributor | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | + |
| 06/29/2025 | | | | | | \$300.00 |
| | Contributor address; City; St | tate; Zip Code | | | | |
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| | David David TV 70004 | | | | | |
| | Round Rock, TX 78664 | 、 | | Ĺ | | |
| | pation / Job title (See Instructions | 5) | Employer (See Instructions | 5) | | |
| Not Employe | ed | | Not Employed | | | |
| Date | Full name of contributor | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| 06/30/2025 | Pajer, Hengameh | | | | | \$100.00 |
| | Contributor address; City; Si | tate; Zip Code | | 1 | | |
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| | New Caney, TX 77357 | | | | | |
| Principal occu | pation / Job title (See Instructions | 5) | Employer (See Instructions | 5) | | |
| Physician | | | Self | | | |
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| The Inst | truction Guide explains how | v to complete this f | iorm. | | Total pages Schedule A1: Sch: 149/228 Rpt: 152/272 | 2 |
|---------------|--|-----------------------------|------------------------------|----------|---|-----------|
| 2 FILER NA | ME | | | 3 | Filer ID (Ethics Commission | ı Filers) |
| | James (The Honorable) | | | | 00081913 | |
| 4 Date | 5 Full name of contributor | out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| 06/23/202 | · · | | | | | \$50.00 |
| | 6 Contributor address; City; S | State; Zip Code | | " | | |
| | Wichita Falls, TX 76308 | | | | | |
| 8 Principal c | ccupation / Job title (See Instruction | IS) | 9 Employer (See Instructions | s) | | |
| Not empl | | , | Not employed | | | |
| Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Ι | Amount of Contribution (\$) | |
| 06/30/202 | | | | | | \$100.00 |
| - | Contributor address; City; S | | | · | | |
| | | idie, zip Code | | | | |
| | Brooklyn, NY 11209 | | | | | |
| Principal o | occupation / Job title (See Instruction | s) | Employer (See Instructions | s) | | |
| Not Empl | oyed | | Not Employed | | | |
| Date | Full name of contributor | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| 06/30/202 | | | | | | \$25.00 |
| | | State [,] Zin Code | | · | | |
| | | | | | | |
| | San Antonio, TX 78249 | | | | | |
| Principal c | occupation / Job title (See Instruction | s) | Employer (See Instructions | s) | | |
| Educator | | | NISD | | | |
| Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Τ | Amount of Contribution (\$) | |
| 06/30/202 | 25 Parker, Madison | | | | • • | \$20.00 |
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| | | ilale, Zip Coue | | | | |
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| | Austin, TX 78728 | | | | | |
| Principal c | occupation / Job title (See Instruction | s) | Employer (See Instructions | s) | | |
| Teacher | | | AISD | | | |
| Date | Full name of contributor | out-of-state PAC (ID#:_ | ·) | | Amount of Contribution (\$) | |
| 06/30/202 | | | | | | \$10.00 |
| | Contributor address; City; S | State; Zip Code | | · | | |
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| | Austin, TX 78726 | | | | | |
| Principal o | I occupation / Job title (See Instruction | IS) | Employer (See Instructions | <u> </u> | | |
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| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1: Sch: 150/228 Rpt: 153/272 |
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| 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Talarico, James (The Honorable) | 00081913 |
| 4 Date 5 Full name of contributor out-of-state PAC (ID#:) | 7 Amount of Contribution (\$) |
| 06/30/2025 Parra, Allen | \$25.00 |
| 6 Contributor address; City; State; Zip Code | |
| | |
| Kyle, TX 78640 | |
| 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) |) |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/30/2025 Partridge, Paula | \$50.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Bedford, TX 76021 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) |) |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/25/2025 Patel, Purva | \$25.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Houston, TX 77035 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) |) |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/28/2025 Payne, Brittney | \$25.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Dallas, TX 75214 Employer (See Instructions) | |
| Principal occupation / Job title (See Instructions)Employer (See Instructions)Escrow OfficerBenchmark Title |) |
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| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/23/2025 Payton-Ross, Charlotte | \$1,000.00 |
| Contributor address; City; State; Zip Code | |
| | |
| Austin, TX 78746 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) |) |
| Not Employed Not Employed | , , |
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| 2 F | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| ר | Talarico, Jar | mes (The Honorable) | | | 00081913 | |
| 4 C | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| C | 06/23/2025 | Payton-Ross, Charlotte | | | | \$100.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Austin, TX 78746 | | | | |
| 8 F | Principal occu | | 9 Employer (See Instructions) |) | | |
| Г | Not Employe | 2d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| C | 06/26/2025 | Peace, Laura | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Kamp TV 75142 | | | | |
| <u> </u> | Principal occu | Kemp, TX 75143 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Not Employe | | Not Employed |) | | |
| | Date | Full name of contributor out-of-state PAC (ID#: | | | Amount of Contribution (\$) | |
| | 06/26/2025 | Pechacek, Robert | / | | Allount of Contribution (\$) | \$50.00 |
| | 0,20,20 | Contributor address; City; State; Zip Code | | | | T |
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| | | | | | | |
| | | Mills River, NC 28759 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions) |) | | |
| | CFO | | CRMG | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | * 25 00 |
| | 06/30/2025 | Pederson, Rebecca | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Dallas, TX 75206 | | | | |
| F | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) |) | | |
| ٢ | Not Employe | ;d | Not Employed | | | |
| C | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| C | 06/30/2025 | Pena, Cristella | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Austin, TX 78754 | | | | |
| ┝╴ | Princinal occu | pation / Job title (See Instructions) | Employer (See Instructions) | <u>ן</u> | | |
| | | guage Pathologist | Pflugerville ISD |) | | |
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| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission I | Filers) |
| | | nes (The Honorable) | | | | 00081913 | |
| 4 | Date | 5 Full name of contributor | out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Pence, Mary | | | | | \$25.00 |
| | | 6 Contributor address; City; Si | | | 1 | | |
| | | | | | | | |
| | | Falls Church, VA 22046 | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions | 5) | 9 Employer (See Instructions | 5) | | |
| | Not Employe | ed | | Not Employed | | | |
| ⊨ | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Г | Amount of Contribution (\$) | |
| | 06/24/2025 | Pendland, Grace | | | | | \$50.00 |
| | 00/2 //2020 | Contributor address; City; Si | | | • | | +00100 |
| | | Contributor address, City, Si | iale, zip coue | | | | |
| | | | | | | | |
| | | Houston, TX 77035 | | | | | |
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| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Perez, Doroteo | | | | | \$25.00 |
| | | Contributor address; City; St | | | 1 | | |
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| | | Buda, TX 78610 | | | | | |
| | Principal occu | pation / Job title (See Instructions | 6) | Employer (See Instructions | 5) | | |
| | IT Sales | | | T-Mobile | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Г | Amount of Contribution (\$) | |
| | 06/29/2025 | Perkison, Patricia | | / | | / incunt of Contribution (+) | \$50.00 |
| | 00/20/2020 | | tata. Zin Cada | | | | 400.00 |
| | | Contributor address; City; Si | lale; Zip Code | | | | |
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| | | Coorgotown TV 79622 | | | | | |
| | <u> </u> | Georgetown, TX 78633 | 、 | | Ĺ | | |
| | | pation / Job title (See Instructions | 5) | Employer (See Instructions | 5) | | |
| | Retired | | | none | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Perroni, Abi | | | | | \$15.00 |
| | | Contributor address; City; Si | tate; Zip Code | | 1 | | |
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| | | Austin, TX 78728 | | | | | |
| \vdash | Principal occu | pation / Job title (See Instructions) | 6) | Employer (See Instructions | ـــــــــــــــــــــــــــــــــــــ | | |
| | Teacher | | | Austin ISD | | | |
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| The Instru | ction Guide explains how to complete this | ; form. | 1 Total pages Schedule A1: Sch: 153/228 Rpt: 156/272 | |
|--------------------|---|-------------------------------------|---|-------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers | s) |
| | mes (The Honorable) | | 00081913 | -, |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID# | #:) | 7 Amount of Contribution (\$) | |
| 06/30/2025 | Persky, Ronnie | | \$5 | 50.00 |
| | 6 Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Bartlett, TX 76511 | | | |
| 8 Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions) | <u> </u> | |
| Not Employe | | Not Employed |) | |
| | | | Amount of Contribution (\$) | |
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| 06/30/2025 | | | Φζ | 25.00 |
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| | Austin, TX 78728 | | | |
| Dringinal occu | | Employer (See Instructions) | | |
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| Date | | #:) | Amount of Contribution (\$) | |
| 06/30/2025 | Phalen, Danielle | | \$2 | 25.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Spring, TX 77373 | | | |
| • | upation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Registered [| Dietitian | DaVita | | |
| Date | | #:) | Amount of Contribution (\$) | _ |
| 06/30/2025 | Pharr, Melinda | | \$10 | 00.00 |
| | Contributor address; City; State; Zip Code | | | |
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| | Austin, TX 78756 | | | |
| | upation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Not Employe | ed | Not Employed | | |
| Date | Full name of contributor Dut-of-state PAC (ID# | #:) | Amount of Contribution (\$) | |
| 06/25/2025 | Pinto, Cara | | \$1 | 10.00 |
| | Contributor address; City; State; Zip Code | | | |
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| | Chapel Hill, NC 27516 | | | |
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| | The Instru | ction Guide explains how to complete this f | form. | 1 | Total pages Schedule A1: Sch: 154/228 Rpt: 157/272 | 2 |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | I Filers) |
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| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/28/2025 | Pisani, Whitney | | | | \$50.00 |
| | I | 6 Contributor address; City; State; Zip Code | | 1 | | |
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| | l | Carrollton, TX 75007 | | | | |
| 8 | Principal occu | I pation / Job title (See Instructions) | 9 Employer (See Instructions | ⊥ s) | | |
| | Educator | · · · | N/a | , | | |
| - | Date | Full name of contributor out-of-state PAC (ID#:_ |) | Τ | Amount of Contribution (\$) | |
| | 06/23/2025 | Piskorz, Linda | / | | , uncant of contraction (, | \$100.00 |
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| | I | Round Rock, TX 78681 | | | | |
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| | Not Employe | d. | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Pittman, Linda | | | | \$25.00 |
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| | | Baton Rouge, LA 70806 | | | | |
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| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Pitts, Amanda | | | | \$25.00 |
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| | l | | | | | |
| | | Austin, TX 78744 | | ŕ | | |
| | • | pation / Job title (See Instructions) | Employer (See Instructions DVISD | 5) | | |
| | Teacher | | _ | — | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | ÷05 00 |
| | 06/30/2025 | Platisa, Angelica | | | | \$25.00 |
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| | I | El Paso, TX 79912 | | | | |
| | Dringingl occu | | Employer (See Instruction) | | | |
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| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | nes (The Honorable) | | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC | C (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/27/2025 | Polak, Quinton | | | | | \$10.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | | |
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| | | | | | | | |
| | | Pearland, TX 77581 | | | | | |
| 8 | | pation / Job title (See Instructions) | 9 | Employer (See Instructions | 5) | | |
| | Drafter | | | Emerson | | | |
| | Date | Full name of contributor 🔲 out-of-state PAC | C (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Pope, Shane | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
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| | | Coppell, TX 75019 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Software En | gineer | | Shopify | | | |
| | Date | Full name of contributor 🛛 out-of-state PAC | C (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Porter, Elisabeth | | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
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| | | Brentwood, TN 37027 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Assistant | | | Scout Tours | | | |
| | Date | Full name of contributor 🔲 out-of-state PAC | C (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Potter, Sharon | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
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| | | Galveston, TX 77554 | | | Ļ | | |
| | • | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Not Employe | d | | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC | C (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Powell, Cooper | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
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| | | Chicago, IL 60613 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Media buyer | | | Spark Foundry | | | |
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| 1 Date 5 Full name of contributor out-of-state PAC (D#: | 2 FILER NAME | | | | on Filers) |
| 06/25/2025 Powell. Sheree \$\$0.00 6 Contributor address; City; Siate; Zip Code \$\$0.00 Midlothian, TX 76065 9 Employer (See Instructions) Not Employed \$ Date Full name of contributor | | | | | |
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| Round Rock, TX 78664 Employer (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Quick, Lynn Amount of Contribution (\$) \$100.00 06/25/2025 Guidk, Lynn State; Zip Code Amount of Contribution (\$) Round Rock, TX 78681 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Employer (See Instructions) Not Employed Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) \$25.00 | | - | | | |
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| Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) Quick, Lynn Amount of Contribution (\$) Contributor address; City; State; Zip Code \$100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Round Rock, TX 78681 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Employer (See Instructions) Date Full name of contributor Date Full name of contributor Oatae Full name of contributor Od/30/2025 Full name of contributor R Martinez, Andres out-of-state PAC (ID#:) Amount of Contribution (\$) \$25.00 | | | | | |
| Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/25/2025 Quick, Lynn \$100.00 Contributor address; City; State; Zip Code Found Rock, TX 78681 \$100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Not Employed Out-of-state PAC (ID#:) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 06/30/2025 R Martinez, Andres \$25.00 | | | | | |
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| 06/30/2025 R Martinez, Andres \$25.00 | Not Employe | ¢d | Not Employed | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| Contributor address; City; State; Zip Code | 06/30/2025 | R Martinez, Andres | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | |
| | | | | | |
| San Antonio, TX 78258 | | San Antonia TY 78258 | | | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | Drincinal occu | 1 | Employer (See Instructions | <u> </u> | |
| Membership Specialist EDUCAUSE | | | | 5) | |
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| The Instru | ction Guide explains how to complete this f | form. | 1 Total pages Schedule A1: Sch: 157/228 Rpt: 160/272 |
|----------------|---|------------------------------|---|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/30/2025 | ROCAMORA, Gradi | | \$50. |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | Austin, TX 78728 | | |
| - | upation / Job title (See Instructions) | 9 Employer (See Instructions | 5) |
| Public Docu | ment Retrieval | Gradi Rocamora | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Rabroker, Timothy | | \$3. |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| | Killeen, TX 76542 | | |
| - | upation / Job title (See Instructions) | Employer (See Instructions | 5) |
| Firefighter | | City of Killeen | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/25/2025 | Rahim, Faraz | | \$25. |
| | Contributor address; City; State; Zip Code | | • |
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| | | | |
| | Houston, TX 77035 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | 5) |
| lt | | Оху | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Rahman, Suzanne W | | \$100. |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| | Houston, TX 77079 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | 5) |
| СРА | | SEI LLC | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/26/2025 | Ralph, Roger | | \$1,000. |
| | Contributor address; City; State; Zip Code | | 1 |
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| | | | |
| | Longboat Key, FL 34228 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | 5) |
| Not Employe | ed | Not Employed | |
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| | The Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 158/228 Rpt: 161/272 | |
|----------|--------------------|---|--|-------------|---|----------------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Talarico, Jar | nes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Ramirez, Rene | | | | \$50.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Austin TV 2024F | | | | |
| 8 | Dringing ogg | Austin, TX 78745 pation / Job title (See Instructions) | 9 Employer (See Instructions | | | |
| ° | Software | | Datasembly | 5) | | |
| ╞ | | | - | — | Amount of Contribution (\$ | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$25.00 |
| | 00/30/2025 | Ramirez, Samantha | | | | φ25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Rosharon, TX 77583 | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Accountant | | Patrick Cooper & Assoc | | | |
| ⊨ | Date | Full name of contributor out-of-state PAC (ID#: |) | Т | Amount of Contribution (\$) | |
| | 06/30/2025 | Ramsey, Barbara | / | | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Georgetown, TX 78633 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | retired | | none | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/23/2025 | Rash, Gail | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | |
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| | Dringinglagou | Gunnison, CO 81230 | Employer (Coolingtruction | | | |
| | Not employe | pation / Job title (See Instructions) | Employer (See Instructions Not employed | S) | | |
| ╘ | | | | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | фо <u>г</u> оо |
| | 06/29/2025 | Ray, Graciela | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Round Rock, TX 78664 | | | | |
| \vdash | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | L | | |
| | Program ma | | BAE Systems Inc | , | | |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 159/228 Rpt: 162/272 | 2 |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | nes (The Honorable) | | I | 00081913 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Raymond, Lance | | | | \$100.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Lake Jackson, TX 77566 | | | | |
| • | Bringinal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | <u> </u> | | |
| ° | Not Employe | | Not Employed | 5) | | |
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| | Date | |) | | Amount of Contribution (\$) | |
| | 06/27/2025 | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
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| | | | | | | |
| | | Austin, TX 78738 | | Ĺ | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Redding, Michael | | | | \$500.00 |
| | | Contributor address; City; State; Zip Code | |] | | |
| | | | | | | |
| | | | | | | |
| | | Austin, TX 78745 | | | | |
| | • | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Product Mar | nager | Indeed | | | |
| | Date | Full name of contributor 🔲 out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| | 06/27/2025 | Reed, Barbara | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | | |
| | | San Antonio, TX 78258 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | ed | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Reed, sarah | | | | \$20.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | | |
| | | Fostoria, OH 44830 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not employe | d | Not employed | | | |
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| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1: Sch: 160/228 Rpt: 163/272 |
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| 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Talarico, James (The Honorable) | 00081913 |
| 4 Date 5 Full name of contributor out-of-state PAC (ID#:) | 7 Amount of Contribution (\$) |
| 06/30/2025 Reedholm, Joseph | \$100.00 |
| 6 Contributor address; City; State; Zip Code | |
| | |
| Georgetown, TX 78633 | |
| 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) |) |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/30/2025 Rehm, Patricia | \$50.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Temple, TX 76504 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) |) |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/30/2025 Reilly, Jackie | \$25.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Kyle, TX 78640 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) |) |
| Swim Instructor YMCA | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/30/2025 Reinhard, Heidi | \$25.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Penobscot, ME 04476 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) |) |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/29/2025 Reinken, Janis | \$7.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Austin, TX 78755 | |
| Austin, TX 78755 Principal occupation / Job title (See Instructions) Employer (See Instructions) |) |
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| The Instru | ction Guide explains how to complete thi | s form. | | tal pages Schedule A1: h: 161/228 Rpt: 164/272 | 2 |
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| 2 FILER NAME | | | 3 File | er ID (Ethics Commission | Filers) |
| | nes (The Honorable) | | | 081913 | , |
| 4 Date | 5 Full name of contributor 🗌 out-of-state PAC (II | D#:) | 7 Am | nount of Contribution (\$) | |
| 06/28/2025 | Reinken, Janis | | | | \$14.00 |
| | 6 Contributor address; City; State; Zip Code | | | | |
| | | | | | |
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| | Austin, TX 78755 | | | | |
| 8 Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instruction: | s) | | |
| Not Employe | ed | Not Employed | | | |
| Date | Full name of contributor Out-of-state PAC (II | | Am | ount of Contribution (\$) | |
| 06/25/2025 | Reinken, Janis | / | | | \$7.00 |
| | Contributor address; City; State; Zip Code | | | | |
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| | Austin, TX 78755 | | | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruction | <u> </u> | | |
| Not Employe | | Not Employed | -) | | |
| Date | | | ٨٣ | ount of Contribution (\$) | |
| 06/26/2025 | Full name of contributor out-of-state PAC (II Reinken, Janis | J#:) | | ount of Contribution (\$) | \$21.00 |
| 00/20/2025 | | | | | φ21.00 |
| | Contributor address; City; State; Zip Code | | | | |
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| | Austin, TX 78755 | | | | |
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| Not Employe | | Not Employed | 5) | | |
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| Date | Full name of contributor out-of-state PAC (II | D#:) | Am | nount of Contribution (\$) | |
| 06/29/2025 | Renquist, Mike | | | | \$20.00 |
| | Contributor address; City; State; Zip Code | | | | |
| | | | | | |
| | | | | | |
| | Austin, TX 78758 | | | | |
| | pation / Job title (See Instructions) | Employer (See Instruction | s) | | |
| Not Employe | 20 | Not Employed | | | |
| Date | Full name of contributor 🔲 out-of-state PAC (II | D#:) | Am | ount of Contribution (\$) | |
| 06/23/2025 | Renquist, Mike | | | | \$15.00 |
| | Contributor address; City; State; Zip Code | | | | |
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| | | | | | |
| | Austin, TX 78758 | | | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instruction | s) | | |
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| Talarico, James (The Honorable) 00081913 | | | | | |
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| Talarico, James (The Honorable) 00081913 4 Date 5 Full name of contributor out-of-state PAC (Dis:) 7 Amount of Contribution (S) 06/30/2025 6 Contributor address; City; State; Zip Code 7 Amount of Contribution (S) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (S) 06/24/2025 Full name of contributor out-of-state PAC (Dis: | The Instru | ction Guide explains how to complete this f | orm. | | |
| Talarico, James (The Honorable) 00081913 4 Date 5 Full name of contributor out-of-state PAC (Dis:) 7 Amount of Contribution (S) 06/30/2025 6 Contributor address; City; State; Zip Code 7 Amount of Contribution (S) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (S) 06/24/2025 Full name of contributor out-of-state PAC (Dis: | 2 FILER NAME | | | 3 Filer ID (Ethics Commission F | -ilers) |
| 06/30/2025 Resendez, Joe \$10.00 6 Contributor address; City, State; Zip Code \$10.00 7 Houston, TX 77062 9 Employer (See Instructions) None 8 Principal occupation / Job title (See Instructions) Retired Amount of Contribution (\$) \$10.00 06/24/2025 Full name of contributor out-of-state PAC (De: | Talarico, Jar | nes (The Honorable) | | | |
| 6 Contributor address: City: State; Zip Code Houston, TX 77062 8 Principal occupation / Job Ittle (See Instructions) Retired 9 Employer (See Instructions) None 06/24/2025 Full name of contributor out-of-state PAC (DM: | 4 Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) | |
| 6 Contributor address; City; State; Zip Code Houston, TX 77062 9 B Principal occupation / Job title (See Instructions) Retired 9 Date 06/24/2025 Full name of contributor out of-state PAC (Der) None Amount of Contribution (\$) S100.00 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) S100.00 Date 06/24/2025 Full name of contributor out-of-state PAC (Der) Not Employed Amount of Contribution (\$) S25.00 Date 06/23/2025 Full name of contributor out-of-state PAC (Der) On the comployed Amount of Contribution (\$) S25.00 Date 06/26/2025 Full name of contributor out-of-state PAC (Der) On intracs Amount of Contribution (\$) S25.00 Date 06/26/2025 Full name of contributor out-of-state PAC (Der) On intracs Amount of Contribution (\$) S900.00 Object/2025 Full name of contributor out-of-state PAC (Der) Autourt of Contribution (\$) S900.00 S900.00 Object/2025 Full name of contributor out-of-state PAC (Der) Autourt of Contribution (\$) S900.00 S900.00 Object/2025 Full name of contributor out-of-state PAC (Der) Autourt of Contribution (\$) S100.00 S900. | 06/30/2025 | | | | \$10.00 |
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| 9 Principal occupation / Job title (See Instructions) None 9 Employer (See Instructions) None Date 06/24/2025 Full name of contributor out-of-state PAC (Dor Contributor address; City; State; Zip Code Amount of Contribution (\$) \$100.00 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) \$255.00 Date 06/23/2025 Full name of contributor out-of-state PAC (Dor Contributor address; City; State; Zip Code Amount of Contribution (\$) \$255.00 Date 06/23/2025 Full name of contributor out-of-state PAC (Dor Contributor address; City; State; Zip Code Amount of Contribution (\$) \$255.00 Date 06/26/2025 Full name of contributor out-of-state PAC (Dor Contributor address; City; State; Zip Code Amount of Contribution (\$) Ornnitracs Date 06/26/2025 Full name of contributor out-of-state PAC (Dor Austin, TX 78733 Amount of Contribution (\$) Self Date 06/23/2025 Full name of contributor out-of-state PAC (Dor Austin, TX 78731 Amount of Contribution (\$) S100.00 Principal occupation / Job title (See Instructions) not employed Employer (See Instructions) self Amount of Contribution (\$) S100.00 Date 06/23/2025 Full name of contributor out-of-state PAC (Dor Date S100.00 Amount of Contribution (\$) S100.00 | | | | | |
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| Retired None Date 06/24/2025 Full name of contributor | | | | | |
| Date Full name of contributor out-of-state PAC (IDE) Amount of Contribution (\$) 06/24/2025 Reviil, Laurie \$100.00 Contributor address; City; State; Zip Code Seabrook, TX 77586 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Full name of contributor out-of-state PAC (IDE) Amount of Contribution address; City; State; Zip Code Amount of Contribution (\$) 06/23/2025 Reyes, Mario out-of-state PAC (IDE) Obj/23/2025 Reyes, Mario out-of-state PAC (IDE) Date Dallas, TX 75243 Employer (See Instructions) Off-Z6/2025 Full name of contributor out-of-state PAC (IDE) Ansount of Contributor address; City; State; Zip Code Amount of Contribution (\$) 06/26/2025 Full name of contributor out-of-state PAC (IDE) Principal occupation / Job title (See Instructions) Employer (See Instructions) Off-Z6/2025 Full name of contributor out-of-state PAC (IDE) Principal occupation / Job title (See Instructions) Employer (See Instructions) \$900.00 Off-Z6/2025 Full name of contributor out-of- | | pation / Job title (See Instructions) | |) | |
| 06/24/2025 Revill, Laurie \$100.00 Contributor address; City; State; Zip Code \$100.00 Seabrook, TX 77586 Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#: | Retired | | None | | |
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| The Instru | iction Guide explains how to complete this f | orm. | | Total pages Schedule A1: Sch: 163/228 Rpt: 166/272 | 2 |
|--------------|---|------------------------------|----|---|-----------|
| 2 FILER NAME | | | 3 | Filer ID (Ethics Commission | n Filers) |
| Talarico, Ja | mes (The Honorable) | | | 00081913 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| 06/29/2025 | Reynolds, Joseph | | | | \$100.00 |
| | 6 Contributor address; City; State; Zip Code | | " | | |
| | | | | | |
| | Austin, TX 78731 | | | | |
| - | upation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| Not Employ | ed | Not Employed | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| 06/30/2025 | Reynolds, Joseph | | | | \$50.00 |
| | Contributor address; City; State; Zip Code | | " | | |
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| | Austin, TX 78731 | | | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| Not Employ | ed | Not Employed | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Τ | Amount of Contribution (\$) | |
| 06/30/2025 | Rhett, Nancy | | | | \$50.00 |
| | Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | |
| | New Orleans, LA 70118 | | | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| Artist | | Self | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Ī | Amount of Contribution (\$) | |
| 06/24/2025 | Rice, Susan | | | | \$10.00 |
| | Contributor address; City; State; Zip Code | | " | | |
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| | | | | | |
| | Katy, TX 77450 | - | | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| Not Employ | ed | Not Employed | | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Τ | Amount of Contribution (\$) | |
| 06/30/2025 | Richardson, Leslie | | | | \$100.00 |
| | Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | |
| | Dallas, TX 75238 | - | | | |
| - | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| Lawyer | | Thompson Cor | | | |
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| | The Instru | ction Guide explains how to complete thi | is form. | | 1 | Total pages Schedule A1: Sch: 164/228 Rpt: 167/272 | 2 |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | nes (The Honorable) | | | | 00081913 | - |
| 4 | Date | 5 Full name of contributor out-of-state PAC (II | D#: |) | 7 | Amount of Contribution (\$) | |
| | 06/23/2025 | Richey, Sharon | | | | | \$100.00 |
| | I | 6 Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | Fort Worth, TX 76133 | | | | | |
| 8 | | pation / Job title (See Instructions) | - | loyer (See Instructions |) | | |
| | Not Employe | :d | Not | Employed | | | |
| | Date | Full name of contributor out-of-state PAC (I | D#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Rindt, Rebecca | | | | | \$25.00 |
| | 1 | Contributor address; City; State; Zip Code | | | | | |
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| | | | | | | | |
| | | Dallas, TX 75229 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | Emp | loyer (See Instructions |) | | |
| | Homemaker | | Hon | ne | | | |
| | Date | Full name of contributor out-of-state PAC (I | D#: |) | | Amount of Contribution (\$) | |
| | 06/24/2025 | Rishkofski, Louis A | | | | | \$20.00 |
| | 1 | Contributor address; City; State; Zip Code | | | | | |
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| | | | | | | | |
| | | Pflugerville, TX 78660 | | | | | |
| | | pation / Job title (See Instructions) | - | loyer (See Instructions |) | | |
| | Therapist | | self | employed | | | |
| | Date | Full name of contributor out-of-state PAC (II | D#: |) | _ | Amount of Contribution (\$) | |
| | 06/29/2025 | Rishkofski, Louis A | | | | | \$20.00 |
| | I | Contributor address; City; State; Zip Code | | | | | |
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| | | | | | | | |
| | | Pflugerville, TX 78660 | | | | | |
| | | pation / Job title (See Instructions) | - | loyer (See Instructions |) | | |
| L | Therapist | | Seit | employed | | | |
| | Date | Full name of contributor 🛛 out-of-state PAC (I | D#: |) | _ | Amount of Contribution (\$) | |
| | 06/30/2025 | Rivera, Liliana | | | | | \$50.00 |
| | I | Contributor address; City; State; Zip Code | | | | | |
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| L | | Pflugerville, TX 78660 | <u></u> | | | | |
| | | pation / Job title (See Instructions) | | loyer (See Instructions |) | | |
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| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1: Sch: 165/228 Rpt: 168/272 |
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| 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Talarico, James (The Honorable) | 00081913 |
| 4 Date 5 Full name of contributor out-of-state PAC (ID#: |) 7 Amount of Contribution (\$) |
| 06/29/2025 Rivers, Constance | \$20.00 |
| 6 Contributor address; City; State; Zip Code | |
| | |
| Galveston, TX 77550 | |
| 8 Principal occupation / Job title (See Instructions) 9 Employer (See In | Istructions) |
| Not Employed Not Employed | |
| Date Full name of contributor Out-of-state PAC (ID#: |) Amount of Contribution (\$) |
| 06/30/2025 Ro, Julia | \$25.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Austin, TX 78758 | |
| Principal occupation / Job title (See Instructions) Employer (See In | istructions) |
| Designer HEB | |
| Date Full name of contributor out-of-state PAC (ID#: |) Amount of Contribution (\$) |
| 06/30/2025 Roalson, Howard | \$50.00 |
| Contributor address; City; State; Zip Code | |
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| Georgetown, TX 78626 | · · · · · · · · · · · · · · · · · · · |
| Principal occupation / Job title (See Instructions) Employer (See In Not Employed Not Employed | istructions) |
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| Date Full name of contributor out-of-state PAC (ID#: | |
| 06/30/2025 Robb, Christina | \$25.00 |
| Contributor address; City; State; Zip Code | |
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| Watertown, CT 06795 | |
| Principal occupation / Job title (See Instructions) Employer (See In | Instructions) |
| Analytical Chemist State of CT | |
| Date Full name of contributor Out-of-state PAC (ID#: |) Amount of Contribution (\$) |
| 06/30/2025 Roberts, Kathryn | \$10.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| San Antonio, TX 78247 | |
| Principal occupation / Job title (See Instructions) Employer (See In | |
| Financial analyst Security service | e FCU |
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| The Instruc | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 166/228 Rpt: 169/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jan | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/30/2025 | Roberts, Sherrill | | \$50.00 |
| | 6 Contributor address; City; State; Zip Code | | |
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| | Austin, TX 78724 | | |
| 8 Principal occu Sr Dir | ipation / Job title (See Instructions) | 9 Employer (See Instructions Jasper | ;) |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Robinson, Sally | | \$100.00 |
| | Contributor address; City; State; Zip Code | | |
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| | Galveston, TX 77550 | | |
| - | ipation / Job title (See Instructions) | Employer (See Instructions UTMB | <i>i</i>) |
| physician | | - | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/26/2025 | Robinson, Sally | | \$100.00 |
| | Contributor address; City; State; Zip Code | | |
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| | Galveston, TX 77550 | | |
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| physician | | UTMB | <i>v</i> |
| Date | Full name of contributor Out-of-state PAC (ID#: | <u> </u> | Amount of Contribution (\$) |
| 06/27/2025 | Robinson, Sally | | \$100.00 |
| 00.2 | Contributor address; City; State; Zip Code | | |
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| | Galveston, TX 77550 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | ;) |
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| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/29/2025 | Robinson, Sally | | \$100.00 |
| | Contributor address; City; State; Zip Code | | |
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| physician | | UTMB | |
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| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 167/228 Rpt: 170/272 | 2 |
|---|------------------------------|--|---|----------------|---|----------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Talarico, Jar | mes (The Honorable) | ļ | | 00081913 | |
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| | ! | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | Galveston, TX 77550 | | | | |
| | Principal occu physician | upation / Job title (See Instructions) | 9 Employer (See Instructions) UTMB | 5) | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Rodchenko, Karina | ļ | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | Katy, TX 77493 |] | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions) | 5) | | |
| | Closing anal | yst | Cbre | _ | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Ī | Amount of Contribution (\$) | |
| | 06/26/2025 | Rodriguez, Elsa Contributor address; City; State; Zip Code | |] | | \$10.00 |
| | | Austin, TX 78753 | Employer (See Instructions | | | |
| | Financial Ana | ipation / Job title (See Instructions) alvst | Employer (See Instructions) HHSC | 5) | | |
| | | | <u> </u> | — | | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$25.00 |
| | 0013012020 | Rodriguez, Tanya Contributor address; City; State; Zip Code | | | | Φ20.00 |
| | ļ | Buda, TX 78610 | ļ | | | |
| | Principal occu Accountant | upation / Job title (See Instructions) | Employer (See Instructions) State of Texas | <u>ا</u> چ) | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/26/2025 | Rogers, Catherine | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | ł | Fort Worth, TX 76110 | ļ | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions) | 5) | | |
| | School couns | selor | FWISD | | | |
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| The Instru | iction Guide explains how to complete this f | iorm. | 1 Total pages Schedule A1: Sch: 168/228 Rpt: 171/272 | |
|------------------------------|--|---|---|--------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filer | ·s) |
| | mes (The Honorable) | | 00081913 | -, |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) | |
| 06/29/2025 | Rogers, Donna | | \$1 | 10.00 |
| | 6 Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| Drincipal occu | Sand Springs, OK 74063 upation / Job title (See Instructions) | 9 Employer (See Instructions) | \ \ | |
| Admin | | Sand Springs Home |) | |
| | | · · · | Amount of Contribution (ft) | |
| Date | — |) | Amount of Contribution (\$) ¢1 | 10.00 |
| 06/30/2025 | | | ΦT | 10.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Sand Springs, OK 74063 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Admin | | Sand Springs Home | ' | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 06/30/2025 | Roller, Cathy | / | | 50.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Redwood Falls, MN 56283 | | | |
| | upation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Not Employ | ed | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 06/30/2025 | Roppolo, Stephen | | \$5 | 50.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| Dringingl ago | Houston, TX 77009 | | \ \ | |
| Principal occu Not Employ | upation / Job title (See Instructions) | Employer (See Instructions) Not Employed |) | |
| | | | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | *= 00 |
| 06/25/2025 | Roseberry, Von | | ب | \$5.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Cheyenne, WY 82009 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Meals on wh | | Meals on wheels | , , | |
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| The Instru | iction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 169/228 Rpt: 172/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jai | mes (The Honorable) | | 00081913 |
| 4 Date 06/29/2025 | 5 Full name of contributor out-of-state PAC (ID#: Ross, Jennifer |) | 7 Amount of Contribution (\$) \$25.00 |
| | 6 Contributor address; City; State; Zip Code | | |
| | Kyle, TX 78640 | | |
| 8 Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | ;) ;) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/28/2025 | Rowe, Dana | | \$20.00 |
| | Contributor address; City; State; Zip Code | | |
| | Midlothian, TX 76065 | | |
| Principal occı | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> ;) |
| Real Estate | | Self | · |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/29/2025 | Rowland, Nancy | / | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | Austin, TX 78731 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> |
| Not employe | | Not employed | ' |
| Date | Full name of contributor out-of-state PAC (ID#: | 1 | Amount of Contribution (\$) |
| 06/27/2025 | Rowold-Brown, Linda | / | \$100.00 |
| 00/21/2022 | Contributor address; City; State; Zip Code | | |
| | | | |
| | Austin, TX 78727 | | |
| Not employe | upation / Job title (See Instructions) ed | Employer (See Instructions Not employed | .) |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | Ruckman, Shoei | | \$5.00 |
| | Contributor address; City; State; Zip Code | | |
| | Santa Fe, TX 77517 | | |
| Principal occı | upation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Assistant br | anch manager | ACU of TEXAS | |
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| | The Instru | ction Guide explains how to complete this | , form. | | Sch: 170/228 Rpt: 173/272 | 2 |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | ı Filers) |
| | Talarico, Jar | mes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID# | #:) | 7 | Amount of Contribution (\$) | |
| | 06/25/2025 | Ruckriegel, Kara Lee | | | | \$10.00 |
| | 1 | 6 Contributor address; City; State; Zip Code | | ·· | | |
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| | | | | | | |
| | | Round Rock, TX 78664 | | | | |
| 8 | | upation / Job title (See Instructions) | 9 Employer (See Instructions | is) | | |
| | Not employe | ;d | Not employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID# | #:) | T | Amount of Contribution (\$) | |
| | 06/30/2025 | Rudy, Jacob | | | | \$10.00 |
| | 1 | Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | | |
| | | Stafford, VA 22554 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | ıs) | | |
| L | Military | | US Govt | | | |
| Γ | Date | Full name of contributor Dut-of-state PAC (ID# | #:) | Т | Amount of Contribution (\$) | |
| | 06/30/2025 | Ruffino, Melissa | | | | \$25.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | | |
| | | Dallas, TX 75230 | | | | |
| | Principal occu Teacher | upation / Job title (See Instructions) | Employer (See Instructions Richardson ISD | IS) | | |
| | | | | | | |
| | Date | | #:) | | Amount of Contribution (\$) | \$150.00 |
| | 06/26/2025 | Ruiz, Adalberto | | | | \$150.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Pearland, TX 77581 | | | | |
| \vdash | Drincinal OCCL | upation / Job title (See Instructions) | Employer (See Instructions | (عر | | |
| | Attorney | | Abogado Ruiz Law Firm | | I.C. | |
| ⊨ | - | | | | | |
| | Date 06/25/2025 | Full name of contributor out-of-state PAC (ID# Ruiz, Teresa Leyba | £:) | | Amount of Contribution (\$) | \$100.00 |
| | 0012012020 | - | | | | Φ100.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Phoenix, AZ 85041 | | | | |
| ⊢ | Principal occi | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Candidate | | Education Forward Arize | | 1 | |
| \vdash | | | | | | |
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| 2 FILER NAME Talarico, James (The Honorable) 3 Filer ID (E 00081913) 4 Date 06/30/2025 5 Full name of contributor out-of-state PAC (ID#:) Rushing, Dana 7 Amount of C 6 Contributor address; City; State; Zip Code 4 Austin, TX 78746 9 Employer (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed 9 Employed | 28 Rpt: 174/272 thics Commission Filers) |
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| Talarico, Jawes (The Honorable) 00081913 4 Date 5 Full name of contributor out-of-state PAC (ID#:) Rushing, Dana 7 Amount of C 06/30/2025 6 Contributor address; City; State; Zip Code 7 Amount of C 6 Contributor address; City; State; Zip Code 9 Employer (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed 9 Employed Amount of C Date Full name of contributor out-of-state PAC (ID#:) Russell, Angela Out-of-state PAC (ID#:) Amount of C 06/26/2025 Full name of contributor out-of-state PAC (ID#:) Amount of C | Contribution (\$) \$10.00 |
| Talarico, Jawes (The Honorable) 00081913 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of C 06/30/2025 Rushing, Dana 6 Contributor address; City; State; Zip Code 7 Amount of C 6 Contributor address; City; State; Zip Code 4 9 Employer (See Instructions) 9 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of C Not Employed Full name of contributor out-of-state PAC (ID#:) Amount of C Amount of C 06/26/2025 Russell, Angela Contributor address; City; State; Zip Code Amount of C Amount of C | Contribution (\$) \$10.00 |
| 06/30/2025 Rushing, Dana 6 Contributor address; City; State; Zip Code Austin, TX 78746 Austin, TX 78746 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed 9 Date Full name of contributor out-of-state PAC (ID#:) 06/26/2025 Russell, Angela | \$10.00 Contribution (\$) |
| 6 Contributor address; City; State; Zip Code 6 Contributor address; City; State; Zip Code Austin, TX 78746 9 8 Principal occupation / Job title (See Instructions) Not Employed 9 Date Full name of contributor out-of-state PAC (ID#:) Russell, Angela Amount of C O6/26/2025 Russell, Angela Contributor address; City; State; Zip Code Amount of C | Contribution (\$) |
| 6 Contributor address; City; State; Zip Code Austin, TX 78746 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of C 06/26/2025 Russell, Angela Contributor address; City; State; Zip Code | |
| 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of C 06/26/2025 Russell, Angela Contributor address; City; State; Zip Code | |
| 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of C 06/26/2025 Russell, Angela Contributor address; City; State; Zip Code | |
| 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of C 06/26/2025 Russell, Angela Contributor address; City; State; Zip Code | |
| Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) 06/26/2025 Russell, Angela Contributor address; City; State; Zip Code | |
| 06/26/2025 Russell, Angela Contributor address; City; State; Zip Code | |
| 06/26/2025 Russell, Angela Contributor address; City; State; Zip Code | |
| Contributor address; City; State; Zip Code | |
| | ſ |
| Austin, TX 78753 | |
| Austin, TX 78753 | |
| | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| Director Texas Veterinary Medical Association | |
| Date Full name of contributor out-of-state PAC (ID#:) Amount of C | Contribution (\$) |
| 06/29/2025 Ruth, Patricia | \$100.00 |
| Contributor address; City; State; Zip Code | |
| | |
| | |
| Round Rock, TX 78665 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| Not Employed Not Employed | |
| | Contribution (\$) |
| 06/24/2025 Rutishauser, Robert | \$100.00 |
| Contributor address; City; State; Zip Code | |
| | |
| Austin, TX 78731 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) Amount of C | Contribution (\$) |
| 06/28/2025 Rutishauser, Robert | \$100.00 |
| | |
| Contributor address; City; State; Zip Code | |
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| Contributor address; City; State; Zip Code | |
| Contributor address; City; State; Zip Code Austin, TX 78731 | |
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| | The Instru | ction Guide explains how to complete this f | iorm. | 1 | Total pages Schedule A1: Sch: 172/228 Rpt: 175/272 | 2 |
|---|--------------------------------|---|------------------------------------|--------------|---|----------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Talarico, Jar | mes (The Honorable) | | | 00081913 | - |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/23/2025 | Ryan, Michael | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| Ļ | | Round Rock, TX 78681 | 1 | | | |
| 8 | | ipation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Not Employe | | Not Employed | _ | | |
| | Date | |) | | Amount of Contribution (\$) | |
| | 06/28/2025 | Rybczyk, Madelyn | | | | \$250.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Dallas, TX 75218 | | | | |
| - | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Marketing | | Cinemark USA Inc. | 5) | | |
| ⊨ | _ | | | T | Amount of Contribution (¢) | |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#: Rychlik, Karen |) | | Amount of Contribution (\$) | \$10.00 |
| | 00/30/2023 | - | | • | | Φ10.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Chicago, IL 60607 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Biostatisticia | 'n | Kelly services | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | SMITH, BLANCA | | | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
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| | <u></u> | Desoto, TX 75115 | 1 | Ĺ | | |
| | Principal occu Teacher Libr | ipation / Job title (See Instructions) | Employer (See Instructions MISD | S) | | |
| | | | | . | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | ¢1E 00 |
| | 06/30/2025 | Saffran, Mary Jane | | | | \$15.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Newark, DE 19702 | | | | |
| ⊢ | Principal occu | Ipation / Job title (See Instructions) | Employer (See Instructions | L S) | | |
| | Not Employe | | Not Employed | , | | |
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| | The Instru | ction Guide explains how to complete t | this for | m. | 1 | Total pages Schedule A1: Sch: 173/228 Rpt: 176/272 | 2 |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | ı Filers) |
| _ | | nes (The Honorable) | | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC | C (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Salinas, Leah | | | | | \$25.00 |
| | I | 6 Contributor address; City; State; Zip Code | , | | | | |
| | | 1 | | | | | |
| | | Austin, TX 78737 | | | | | |
| 8 | | pation / Job title (See Instructions) | 9 | Employer (See Instructions | ;) | | |
| | Not Employe | .d | | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC | C (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/29/2025 | Salome, Wendy | | | | | \$20.00 |
| | I | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | 1 | | | | | |
| | | Austin, TX 78731 | | | | | |
| | Principal occu | I Ipation / Job title (See Instructions) | | Employer (See Instructions | ـــــــــــــــــــــــــــــــــــــ | | |
| | Not employe | | | Not employed | | | |
| ╞ | Date | Full name of contributor Out-of-state PAC | I |) | _ | Amount of Contribution (\$) | |
| | 06/30/2025 | Samoylenko, Yaroslav | C (ID₩ | / | | Allount of Continuation (+) | \$100.00 |
| | 00,00,2020 | | | | | | Ψ100.00 |
| | | Contributor address, City, State, Zip Code | | | | | |
| | | 1 | | | | | |
| | | Houston, TX 77007 | | | | | |
| \vdash | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u>ا</u> ۱) | | |
| | Business Co | | | Kinaxis | , | | |
| ╞ | Date | | | | _ | Amount of Contribution (\$) | |
| | 06/27/2025 | Full name of contributor out-of-state PAC Sanders, Susan | C (ID# | / | | Amount of Contribution (\$) | \$100.00 |
| | 0012112025 | | | | | | Φ100.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | 1 | | | | | |
| | | Austin, TX 78747 | | | | | |
| \vdash | Principal occu | I pation / Job title (See Instructions) | | Employer (See Instructions | <u>ا</u> چ) | | |
| | Not Employe | , | | Not Employed | | | |
| ⊢ | Date | Full name of contributor Out-of-state PAC | | | Γ | Amount of Contribution (\$) | |
| | 06/25/2025 | Sandoval, Gina | 0 (105 | / | | | \$25.00 |
| | 00,20,20 | Contributor address; City; State; Zip Code | | | | | +- |
| | | Contributor address, City, State, Zip Code | | | | | |
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| | | San Antonio, TX 78249 | | | | | |
| \vdash | Princinal occu | pation / Job title (See Instructions) | <u> </u> | Employer (See Instructions | <u>ר</u> | | |
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| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 174/228 Rpt: 177/272 | 2 |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | nes (The Honorable) | | - | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Sansom, Marilyn | | | | \$10.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Austin, TX 78733 | | | | |
| 8 | | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | RN | | Eanes ISD | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/27/2025 | Sansom, Marilyn | | | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | | |
| | | Austin, TX 78733 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | ;) | | |
| | RN | | Eanes ISD | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Sappenfield, Bill | | | | \$200.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Georgetown, TX 78633 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | :d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Sargent, Socorro Muller | | | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | | |
| | | El Paso, TX 79932 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | ;) | | |
| | Not Employe | <u>، ط</u> | Not Employed | _ | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Saul, Sheryl | |] | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | South Point, OH 45680 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | ;) | | |
| | Physician | | Hospital | | | |
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| The Instru | ction Guide explains how to complete this f | iorm. | 1 Total pages Schedule A1: Sch: 175/228 Rpt: 178/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | nes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) |
| 06/28/2025 | Saval, Maureen | | \$50.0 |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| | Leander, TX 78641 | | |
| | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) |
| Not Employe | ?d | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/29/2025 | Scarpelli, Emma | | \$25.0 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Carlsbad, CA 92011 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) |
| Not Employe | d | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/26/2025 | Schelle, Elizabeth | | \$100.0 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Sacramento, CA 95822 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) |
| Not Employe | ∂d | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#:_ | -) | Amount of Contribution (\$) |
| 06/30/2025 | Schindler, Joy | | \$50.0 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Sugar Land, TX 77479 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) |
| Nurse Practi | tioner | UT MD Anderson | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/28/2025 | Schmidt, Sarah | | \$50.0 |
| | Contributor address; City; State; Zip Code | | |
| | - | | |
| | | | |
| | Austin, TX 78727 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) |
| Not Employe | ed . | Not Employed | |
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| The Instru | ction Guide explains how to complete this f | iorm. | 1 Total pages Schedule A1: Sch: 176/228 Rpt: 179/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | nes (The Honorable) | | 00081913 |
| 4 Date | Date 5 Full name of contributor out-of-state PAC (ID#:) | | 7 Amount of Contribution (\$) |
| 06/30/2025 | Schrier, Cheryl | | \$50.00 |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| | Thorntown, IN 46071 | | |
| 8 Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions) |) |
| Not Employe | ∂d | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Schroedter, Timothy | | \$50.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Houston, TX 77006 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) | .)) |
| CRNA | | USAP | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/25/2025 | Schulte, Jessica | | \$100.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Round Rock, TX 78665 | | |
| | pation / Job title (See Instructions) | Employer (See Instructions) |) |
| Not Employe |)d | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Schweitzer, Carrie | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Dallas, TX 75214 | | |
| Principal occu | I Ipation / Job title (See Instructions) | Employer (See Instructions) | .) |
| Not Employe | | Not Employed | |
| Date | Full name of contributor Out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Scott, Gregg | | \$50.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Midlothian, TX 76065 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) |) |
| Manager | | Ricoh | |
| | | | |

| | The Instru | ction Guide explains how to complete t | his fo | rm. | 1 | Total pages Schedule A1: Sch: 177/228 Rpt: 180/272 | 2 |
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| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | nes (The Honorable) | | | | 00081913 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC | ; (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/29/2025 | Segal, Barbara | | | | | \$40.00 |
| | | 6 Contributor address; City; State; Zip Code | | | 1 | | |
| | | | | | | | |
| | | Sea Cliff, NY 11579 | | | | | |
| 8 | Principal occu | upation / Job title (See Instructions) | | 9 Employer (See Instructions | <u> </u> 5) | | |
| - | poet | | | self | -, | | |
| - | Date | Full name of contributor Out-of-state PAC | |) | Γ | Amount of Contribution (\$) | |
| | 06/24/2025 | Selby, Mary | , (ID# | / | | | \$10.00 |
| | 00/2-1/2020 | Contributor address; City; State; Zip Code | | | | | Ψ10.00 |
| | | Continuutor address, City, State, Zip Code | | | | | |
| | | | | | | | |
| | | Austin, TX 78723 | | | | | |
| | Principal occu | I pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> 5) | | |
| | Not Employe | | | Not Employed | , | | |
| _ | Date | Full name of contributor Out-of-state PAC | |) | Γ | Amount of Contribution (\$) | |
| | 06/24/2025 | Semler, Dakota | · (ie | | | , | \$250.00 |
| | | Contributor address; City; State; Zip Code | | | | | · |
| | | | | | | | |
| | | | | | | | |
| | | Malibu, CA 90265 | | | | | |
| | Principal occu | ipation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Ceo | | | Xos trucks | | | |
| | Date | Full name of contributor out-of-state PAC | C (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Sethi, Pooja | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | 1 | | |
| | | | | | | | |
| | | | | | | | |
| | | Austin, TX 78730 | | | | | |
| | | ipation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Not Employe | 2d | | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC | ; (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/27/2025 | Sever, Ann | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Houston, TX 77077 | | | | | |
| | | ipation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Not Employe | 3d | | Not Employed | | | |
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| The Instru | ction Guide explains how to complete this f | form. | 1 Total pages Schedule A1: Sch: 178/228 Rpt: 181/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/29/2025 | Sever, Ann | | \$25. |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| | Heuster TV 77077 | | |
| Dringingloggy | Houston, TX 77077 | C Employer (Cas Instructions | |
| Not Employe | upation / Job title (See Instructions) | 9 Employer (See Instructions Not Employed |) |
| | | | |
| Date | — |) | Amount of Contribution (\$) |
| 06/27/2025 | | | \$5. |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Fort Worth TX 76177 | | |
| Drinoinal agai | Fort Worth, TX 76177 | Employer (Cas Instructions | \ \ |
| Not Employe | upation / Job title (See Instructions) | Employer (See Instructions Not Employed |) |
| | | | |
| Date | — |) | Amount of Contribution (\$) |
| 06/30/2025 | Shackelford, Amy | | \$25. |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Colorado Springs, CO 80919 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions |) |
| Physical The | | Enhabit Home Hwalrh | , |
| Date | · · · · · · · · · · · · · · · · · · · | | Amount of Contribution (\$) |
| 06/27/2025 | Shandorf, Jeff |) | \$10. |
| 00/21/2023 | | | φ 1 0. |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Mendota Heights, MN 55118 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions |) |
| FA | | Delta Airlines | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/26/2025 | Sharde Jackson, Brittany | | \$25. |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Houston, TX 77066 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions |) |
| Service | | EDJ | |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 179/228 Rpt: 182/272 | 2 |
|---|----------------------------|---|--|--------------|---|----------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Talarico, Jar | mes (The Honorable) | | | 00081913 | |
| 4 | | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/25/2025 | Sharp, Jerry | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Georgetown, TX 78633 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Not Employe | }d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Shaw, Tiffany | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | Dringing oog | Austin, TX 78745 | Employer (See Instructions | <u> </u> | | |
| | Corporate Tr | ipation / Job title (See Instructions) raining | Employer (See Instructions FINRA | 5) | | |
| ⊨ | - | | | . | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | ΦΕ 00 |
| | 06/26/2025 | Sheaks, Robert | | | | \$5.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Irving, TX 75060 | | | | |
| - | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Lab tech | | Electro Plate Circuitry | | | |
| _ | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/26/2025 | Sheehan, Kathryn | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| ⊢ | Duincipal acci | Cambridge, MA 02140 | | Ĺ | | |
| | Principal occu Attorney | ipation / Job title (See Instructions) | Employer (See Instructions CDM Smith Inc. | 5) | | |
| ⊨ | - | | | . | | |
| | Date 06/29/2025 | Full name of contributor out-of-state PAC (ID#: Sheffield_Cody. |) | | Amount of Contribution (\$) | \$25.00 |
| | 0012912025 | Sheffield, Cody | | | | Φ20.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Longview, TX 75605 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Educational | Diagnostician | Sabine ISD | | | |
| | | | 1 | | | |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 180/228 Rpt: 183/272 | 2 |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Talarico, Jar | nes (The Honorable) | | | 00081913 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Shelton, Hayley | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Austin, TX 78748 | | | | |
| 8 | | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Marketing P | rogram Manager | Whole Foods Market | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Shelton, Justin | | | | \$150.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Plano, TX 75093 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | | | |
| | Attorney | | Ferguson Braswell Fras | ser ł | Kubasta PC | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Shepherd, Julianne | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Georgetown, TX 78628 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | 20 | Not Employed | | | |
| | Date | Full name of contributor Dut-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Sheppard, Amy | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Fort Worth, TX 76110 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | CRNA | | Self | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Shipley, Michele | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| \vdash | Duin air - I | Dallas, TX 75209 | Freedower (C. J. J. J. | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | S) | | |
| | Not Employe | ÷u | Not Employed | | | |
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| | The Instru | ction Guide explains how t | to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 181/228 Rpt: 184/272 | |
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| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission F | -ilers) |
| | Talarico, Jar | nes (The Honorable) | | | | 00081913 | |
| 4 | Date | 5 Full name of contributor | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/28/2025 | Short, Amanda | | | | | \$50.00 |
| | | 6 Contributor address; City; Star | | | | | |
| | | | | | | | |
| | | Cedar Park, TX 78613 | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | | 9 Employer (See Instructions | 5) | | |
| | manager | | | ea | | | |
| | Date | - | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Siebert, Katy | | | | | \$50.00 |
| | | Contributor address; City; Sta | te; Zip Code | | | | |
| | | | | | | | |
| | | Mililani, HI 96789 | | | | | |
| | Princinal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> ເ) | | |
| | Teacher | | | DOE | ') | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | <u> </u> | Amount of Contribution (\$) | |
| | 06/30/2025 | Siebert, Mike | |) | | | \$25.00 |
| | 00,00,2020 | | te [.] Zin Code | | | | +_0.00 |
| | | | | | | | |
| | | | | | | | |
| | | Eastland, TX 76448 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Not Employe | d | | Not Employed | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Siever, Beth | | | | | \$10.00 |
| | | Contributor address; City; Sta | | | | | |
| | | | | | | | |
| | | Austin, TX 78729 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> 5) | | |
| | Not Employe | | | Not Employed | | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/23/2025 | Silberman, Cindy | | | | | \$50.00 |
| | | Contributor address; City; Sta | te; Zip Code | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Austin, TX 78737 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Not employe | d | | Not employed | | | |
| | | | | | | | |

| | | | | 1 | Total pages Schedule A1: | |
|---|----------------|---|------------------------------|---------|-------------------------------|----------------|
| _ | The Instruc | ction Guide explains how to complete this f | orm. | | Sch: 182/228 Rpt: 185/272 | |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission F | Filers) |
| | | mes (The Honorable) | | | 00081913 | |
| | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/25/2025 | Siller, Adrian | | | | \$10.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | |
| | | 1 | | | | |
| | | Mcgregor, TX 76657 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | 1 5) | | |
| | Auto Tech | | TNA | - | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Silvas, Petrita | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | 1 | | | | |
| | | 1 | | | | |
| | <u> </u> | Buda, TX 78610 | <u> </u> | ļ | | |
| | | ipation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| _ | PM Liaison | | Texas Oncology | - | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | ÷ · > • • |
| | 06/30/2025 | Simms, Howard | | | | \$40.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | 1 | | | | |
| | | Austin, TX 78752 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | 1 5) | | |
| | Not employe | | Not employed | | | |
| | Date | Full name of contributor Out-of-state PAC (ID#:_ |) | Γ | Amount of Contribution (\$) | |
| | 06/23/2025 | Sinclair, Rose | | | • • | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | 1 | | | | |
| | | 1 | | | | |
| | <u> </u> | Austin, TX 78745 | 1 | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | musician | | self | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | * 50.00 |
| | 06/30/2025 | Singh, Misha | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | 1 | | | | |
| | | Austin, TX 78757 | | | | |
| | Principal occu | Ipation / Job title (See Instructions) | Employer (See Instructions | 1 5) | | |
| | Planner | | Supplements | ` | | |
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| | The Instru | ction Guide explains how to complete this | s form. | | 1 | Total pages Schedule A1: Sch: 183/228 Rpt: 186/272 | 2 |
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| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | Talarico, Jar | nes (The Honorable) | | | | 00081913 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID |)#: |) | 7 | Amount of Contribution (\$) | |
| | 06/27/2025 | Singleton, Betsy | | | | | \$100.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | 0 Maraaa TV 70000 | | | | | |
| <u> </u> | Dringing ago | San Marcos, TX 78666 | | vor (Coo Instructions | | | |
| | | pation / Job title (See Instructions) ood educator | Retire | /er (See Instructions d | ») | | |
| | - | | | | _ | | |
| | Date | Full name of contributor out-of-state PAC (ID |)#: |) | | Amount of Contribution (\$) | фо <u>г</u> оо |
| | 06/30/2025 | | | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | Naperville, IL 60565 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employ | ver (See Instructions | <u> </u> 5) | | |
| | Not Employe | | | nployed | | | |
| ⊨ | Date | Full name of contributor Out-of-state PAC (ID |)#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Skogstad, Pamela | | / | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Норе, АК 99605 | | | | | |
| | | pation / Job title (See Instructions) | | er (See Instructions | 5) | | |
| | Education C | onsultant | Self | | | | |
| | Date | Full name of contributor 🔲 out-of-state PAC (ID |)#: |) | | Amount of Contribution (\$) | |
| | 06/25/2025 | Skogstad, Pamela | | | | | \$150.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | Норе, АК 99605 | | | | | |
| ┣─ | Principal occu | pation / Job title (See Instructions) | Employ | /er (See Instructions | <u> </u> ນ | | |
| | Education C | , | Self | | , | | |
| ⊨ | Date | Full name of contributor out-of-state PAC (ID |) |) | | Amount of Contribution (\$) | |
| | 06/26/2025 | Slack, Janyce | /# |) | | | \$30.00 |
| | 00,20,2020 | Contributor address; City; State; Zip Code | | | | | +00.00 |
| | | | | | | | |
| | | | | | | | |
| | | Weatherford, TX 76087 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employ | ver (See Instructions | 5) | | |
| | Not Employe | ed | Not Er | nployed | | | |
| | | | | | | | |

| The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 184/228 Rpt: 187/272 | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers | s) |
| | mes (The Honorable) | | 00081913 | -, |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) | |
| 06/30/2025 | Slamen, Sarah | | \$50 | 50.00 |
| | 6 Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Coppell, TX 75019 | | | |
| 8 Principal occl | upation / Job title (See Instructions) | 9 Employer (See Instructions | <u>.</u> | |
| District Direc | | U.S. House of Represen | | |
| Date | Full name of contributor Out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/29/2025 | Smadbeck, Paul | / | | L0.00 |
| | | | | |
| | | | | |
| | | | | |
| | North Salem, NY 10560 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | ;) | |
| Real estate | broker | JLL | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/30/2025 | Smadbeck, Paul | | \$10 | L0.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | North Salem, NY 10560 | 1 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions |) | |
| Real estate | | JLL | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/30/2025 | Smith, Alice | | \$2 | 25.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Cypress, TX 77429 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> ;) | |
| Not Employe | | Not Employed | , | |
| Date | Full name of contributor Out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 06/30/2025 | Smith, Christine | | | 25.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | San Antonio, TX 78254 | | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | | |
| Not Employe | ed | Not Employed | | |
| | | • | | |

| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1: Sch: 185/228 Rpt: 188/272 |
|--|---|
| 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Talarico, James (The Honorable) | 00081913 |
| 4 Date 5 Full name of contributor out-of-state PAC (ID#:) | 7 Amount of Contribution (\$) |
| 06/29/2025 Smith, Elizabeth | \$10.00 |
| 6 Contributor address; City; State; Zip Code | ·· |
| | |
| | |
| Jacksonville, TX 75766 | |
| 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions | s) |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/25/2025 Smith, Emily | \$100.00 |
| Contributor address; City; State; Zip Code | |
| | |
| | |
| Houston, TX 77018 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions | s) |
| Educator Houston ISD | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/29/2025 Smith, Joy | \$100.00 |
| Contributor address; City; State; Zip Code | |
| | |
| | |
| Lago Vista, TX 78645 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions | s) |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/25/2025 Smith, Joy | \$50.00 |
| Contributor address; City; State; Zip Code | |
| | |
| | |
| Lago Vista, TX 78645 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | s) |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/30/2025 Smith, Laura | \$100.00 |
| | |
| Contributor address; City; State; Zip Code | |
| | |
| Colleyville, TX 76034 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | s) |
| Executive Natera | 5) |
| | |
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| The Instruction Guide explains how to complete this form. | | Total pages Schedule A1: Sch: 186/228 Rpt: 189/272 | 2 |
|--|---------|---|---------------|
| 2 FILER NAME | 3 | Filer ID (Ethics Commission | n Filers) |
| Talarico, James (The Honorable) | | 00081913 | , |
| 4 Date 5 Full name of contributor out-of-state PAC (ID#: | 7 | Amount of Contribution (\$) | |
| 06/26/2025 Smith, Sarah | | | \$100.00 |
| 6 Contributor address; City; State; Zip Code | | | |
| | | | |
| | | | |
| Cypress, TX 77429 | | | |
| 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Not Employed Not Employed | cuons) | | |
| | | | |
| Date Full name of contributor out-of-state PAC (ID#: | | Amount of Contribution (\$) | 405 00 |
| 06/26/2025 Smith, Sharon | | | \$25.00 |
| Contributor address; City; State; Zip Code | | | |
| | | | |
| Mckinney, TX 75072 | | | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | ctions) | | |
| Not Employed Not Employed | ctions) | | |
| | | Amount of Contribution (¢) | |
| Date Full name of contributor out-of-state PAC (ID#: 06/30/2025 Smith, Staci Oller | | Amount of Contribution (\$) | \$25.00 |
| | | | Ψ23.00 |
| Contributor address; City; State; Zip Code | | | |
| | | | |
| Tyler, TX 75707 | | | |
| Principal occupation / Job title (See Instructions) Employer (See Instruct | ctions) | | |
| Not Employed Not Employed | | | |
| Date Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/30/2025 Smith, T. Randall | | | \$50.00 |
| Contributor address; City; State; Zip Code | | | |
| | | | |
| | | | |
| Houston, TX 77084 | | | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | ctions) | | |
| Retired United Methodist Pastor Not Employed | | | |
| Date Full name of contributor out-of-state PAC (ID#: | | Amount of Contribution (\$) | |
| 06/23/2025 Smythia, Beverly | | | \$25.00 |
| Contributor address; City; State; Zip Code | | | |
| | | | |
| | | | |
| Leander, TX 78641 | | | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | ctions) | | |
| Not Employed Not Employed | | | |
| | | | |

| | The Instru | ction Guide explains how to complete this | s fo | rm. | 1 | Total pages Schedule A1: Sch: 187/228 Rpt: 190/272 | 2 |
|----------|----------------------|---|-----------|----------------------------|----------|---|----------|
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | |
| | | mes (The Honorable) | | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID | D#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Snelson, Robert | | | | | \$100.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| L | | Rockwood, PA 15557 | <u> </u> | | | | |
| 8 | | upation / Job title (See Instructions) | 9 | Employer (See Instructions | 5) | | |
| | Not Employe | | | Not Employed | | | |
| | Date | — | D#: |) | | Amount of Contribution (\$) | _ |
| | 06/29/2025 | | | | | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Drive in all a servi | The Woodlands, TX 77382 | _ | | Ĺ | | |
| | | Ipation / Job title (See Instructions) | | Employer (See Instructions | | | |
| | Voter File Ma | | | New York Democratic P | an | - | |
| | Date | Full name of contributor out-of-state PAC (IE |)#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Soboleski, Alyssa | | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | Escondido, CA 92026 | | | | | |
| \vdash | Drincinal occu | ipation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | Counselor | | | Palomar College |) | | |
| ╞ | | | | | - | | |
| | Date | |)#: |) | | Amount of Contribution (\$) | ¢10.00 |
| | 06/30/2025 | Solis, Javier | | | | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | Burbank, CA 91502 | | | | | |
| \vdash | Principal occu | upation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| | Exec Mgmnt | | | Softtek | '' | | |
| ⊨ | Date | Full name of contributor Out-of-state PAC (IE | <u> </u> |) | I | Amount of Contribution (\$) | |
| | 06/30/2025 | Soltys, Jane | J# | | | | \$10.00 |
| | 00,00,2020 | Contributor address; City; State; Zip Code | | | | | Ψ±0.00 |
| | | Continuation address, City, State, Zip Code | | | | | |
| | | | | | | | |
| | | Oakland, NJ 07436 | | | | | |
| ⊢ | Principal occu | I pation / Job title (See Instructions) | | Employer (See Instructions | L;) | | |
| | Corporate FI | | | TelevisaUnivision | , | | |
| ┝ | • | | | | | | |
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| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 188/228 Rpt: 191/272 | |
|---|----------------|---|------------------------------|----------------|---|----------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission F | -ilers) |
| | Talarico, Jar | nes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/28/2025 | Somers-Clark, Carole | | | | \$50.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Dallas, TX 75208 | | | | |
| 8 | | | 9 Employer (See Instructions | 5) | | |
| | Not Employe | d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Song, Philip | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Porter Ranch, CA 91326 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | IOM tech | | UCLA | _ | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Spece, Katherine | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Raleigh, NC 27603 | | | | |
| | Dringing ago | pation / Job title (See Instructions) | Employer (See Instructions | | | |
| | Owner | | Inside Pitch Promotions | | | |
| | | | | <u> </u> | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$100.00 |
| | 06/30/2025 | Speights, Laura | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | San Antonio, TX 78248 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> 5) | | |
| | Not Employe | | Not Employed | , | | |
| _ | Date | Full name of contributor out-of-state PAC (ID#: | | Г | Amount of Contribution (\$) | |
| | 06/30/2025 | Spence, William | | | | \$25.00 |
| | 00,00,2020 | Contributor address; City; State; Zip Code | | | | \$20.00 |
| | | Contributor address, City, State, Zip Code | | | | |
| | | | | | | |
| | | Leander, TX 78641 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | | Not Employed | | | |
| | | | | | | |
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| The Instru | ction Guide explains how to complete this f | iorm. | 1 Total pages Schedule A1: Sch: 189/228 Rpt: 192/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/30/2025 | Spiegelhauer, Mary | | \$100.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | Pearland, TX 77584 | | |
| | ipation / Job title (See Instructions) | 9 Employer (See Instructions | 5) |
| Engineer | | Dow | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Sprague, Brenda | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Alexandria, VA 22308 | | |
| Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | s) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: | <u>.</u>) | Amount of Contribution (\$) |
| 06/30/2025 | Springer, Katie | | \$25.00 |
| | Contributor address; City; State; Zip Code | | · |
| | | | |
| | | | |
| | Rockwall, TX 75087 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | , |
| RN | | Baylor Scott & White He | ealth |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/23/2025 | Stafford, William | | \$250.00 |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| | Houston, TX 77024 | - | |
| | upation / Job title (See Instructions) | Employer (See Instructions | |
| Attorney | | Daniels & Tredennick P | 'LLC |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Staggs, Paige | | \$25.00 |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| | Fort Worth, TX 76135 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| Talent Acqui | isition | Med Device Company | |
| | | | |

| The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 190/228 Rpt: 193/272 |
|------------------|--|------------------------------|---|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | nes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/30/2025 | Stanton, Edith | | \$25.00 |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| | Brady, TX 76825 | | |
| 8 Principal occu | | 9 Employer (See Instructions | <u> </u> |
| Retired | | Retired | " |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Stape, Jessica | | \$50.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Austin, TX 78730 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Engineer | | Google | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/26/2025 | Stark, Sharon | | \$10.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Frisco, TX 75035 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | 51 |
| Not Employe | | Not Employed | <i>י</i> / |
| Date | | | Amount of Contribution (\$) |
| 06/30/2025 | Full name of contributor out-of-state PAC (ID#: Stark, Sharon |) | \$10.00 \$10.00 |
| 0010012020 | | | |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Frisco, TX 75035 | | |
| | ipation / Job title (See Instructions) | Employer (See Instructions | ;) ;) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Steincamp, Regina | | \$10.00 |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| | Friendswood, TX 77546 | | |
| | pation / Job title (See Instructions) | Employer (See Instructions | ;) |
| Sales | | Medline | |
| | | | |

| The Instr | uction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 191/228 Rpt: 194/272 |
|---------------|---|------------------------------|---|
| 2 FILER NAMI | E | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Ja | ames (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/30/2025 | 5 Stevenson Jr, Peter | | \$100.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | Cypress, TX 77429 | | |
| | cupation / Job title (See Instructions) | 9 Employer (See Instructions | 3) |
| Not Employ | /ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | 5 Stewart, Brett | | \$25.00 |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| | Austin, TX 78728 | 1 | |
| | cupation / Job title (See Instructions) | Employer (See Instructions | \$) |
| Marketing | | Attain | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/23/2025 | 5 Stockstiel, Lori | | \$50.00 |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| | Boerne, TX 78015 | 1 /2 | |
| | cupation / Job title (See Instructions) | Employer (See Instructions | \$) |
| Not Employ | | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | 5 Stoddard, Mark | | \$10.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Austin, TX 78723 | | |
| Principal occ | cupation / Job title (See Instructions) | Employer (See Instructions | <u> </u> \$) |
| Not Employ | | Not Employed | , |
| Date | Full name of contributor Out-of-state PAC (ID#: | <u> </u> | Amount of Contribution (\$) |
| 06/30/2025 | | | \$100.00 |
| | Contributor address; City; State; Zip Code | | • |
| | | | |
| | | | |
| | Amarillo, TX 79124 | | |
| Principal occ | cupation / Job title (See Instructions) | Employer (See Instructions | 5) |
| Teacher | | Amarillo ISD | |
| | | 1 | |
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| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 192/228 Rpt: 195/272 | |
|---|----------------|---|------------------------------|----|---|---------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission F | ilers) |
| | | nes (The Honorable) | | | 00081913 | / |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/25/2025 | Stone, Kathryn Suzanne | | | | \$20.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Middlebury, VT 05753 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Not employe | d | Not employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/26/2025 | Stone, Richard | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Taylor, TX 76574 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Principal Co | nsultant | RTS Connect LLC | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/25/2025 | Story, Barbara | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | ł | | |
| | | | | | | |
| | | | | | | |
| | | Austin, TX 78737 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | d | Not Employed | | | |
| ⊨ | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Stough, Aaron | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Plano, TX 75074 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | S) | | |
| | Health Inspe | ctor | City of Plano | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/23/2025 | Straus, Ian | | | | \$5.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | San Antonio, TX 78233 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | d | Not Employed | | | |
| | | | | | | |
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| The Instru | iction Guide explains how to complete this f | iorm. | 1 Total pages Schedule A1: Sch: 193/228 Rpt: 196/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) |
| 06/30/2025 | Strickland, Jo A | | \$25.00 |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| | Austin, TX 78729 | | |
| - | upation / Job title (See Instructions) | 9 Employer (See Instructions | 3) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | Strickler, William | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Washington, DC 20009 | 1 | |
| | upation / Job title (See Instructions) | Employer (See Instructions | \$) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/25/2025 | Stuart, Marcia | | \$20.00 |
| | Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | | | |
| | Fallbrook, CA 92028 | <u> </u> | - |
| | upation / Job title (See Instructions) | Employer (See Instructions | <i>i</i>) |
| Not employe | | Not employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Stuever, Kristen | | \$25.00 |
| l | Contributor address; City; State; Zip Code | | |
| | | | |
| | Austin, TX 78757 | | |
| Principal occi | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> |
| Landscape of | | Self | <i>''</i> |
| Date | Full name of contributor out-of-state PAC (ID#:_ | <u> </u> | Amount of Contribution (\$) |
| 06/30/2025 | Sullivan, Britagne | / | \$25.00 |
| 00,00,2022 | Contributor address; City; State; Zip Code | | |
| 1 | | | |
| | | | |
| | Pflugerville, TX 78660 | | |
| Principal occı | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> ;) |
| Teacher | | Hutto ISD | , |
| | | | |
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| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 194/228 Rpt: 197/272 | 2 |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | ו Filers) |
| | Talarico, Jar | nes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/28/2025 | Sullivan, David | | | | \$50.00 |
| | I | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | Austin, TX 78703 | | | | |
| 8 | Principal occu | I | 9 Employer (See Instructions | <u>ار</u> | | |
| Ľ | Research As | | The University of Texas | | Austin | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/29/2025 | Sullivan, Mark | | | | \$100.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Karnilla TV 70020 | | | | |
| ┡ | Dringingl occur | Kerrville, TX 78028 Ipation / Job title (See Instructions) | Employer (See Instructions | | | |
| | Not Employe | | Not Employed | 5) | | |
| ⊨ | | | | — | Array at Contribution (ft) | |
| | Date 06/27/2025 | Full name of contributor out-of-state PAC (ID#: Sun, Peter |) | | Amount of Contribution (\$) | \$100.00 |
| | 0012112025 | | | | | Φ100.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | La Jolla, CA 92037 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Attorney | | Self Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/28/2025 | Sutaria, Kalpana | | | | \$5.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Austin, TX 78727 | | | | |
| ┢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | ed | Not Employed | | | |
| ╞ | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Suttle, Chelsea | | | | \$100.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| L | | Sulphur Springs, TX 75482 | | | | |
| | | ipation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| L | Corporate Di | irector | Makeready | | | |
| | | | | | | |

| The Instruc | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 195/228 Rpt: 198/272 |
|----------------|--|------------------------------|---|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jan | nes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) |
| 06/30/2025 | Swanoski, Jessica | | \$50.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | Minnetonka, MN 55305 | | |
| | pation / Job title (See Instructions) | 9 Employer (See Instructions | |
| Marketing | | Boston Scientific | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Swinney, Jonathan | | \$50.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Austin, TX 78728 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | \$) |
| Software De | velopment Engineer | Amazon.com | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | Switek, Elizabeth | | \$25.00 |
| | Contributor address; City; State; Zip Code | | • |
| | | | |
| | | | |
| | Austin, TX 78753 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) |
| Librarian | 1 | Austin Independent Sch | iool District |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Syler, Susan | | \$25.00 |
| | Contributor address; City; State; Zip Code | | • |
| | | | |
| | | | |
| | Galveston, TX 77550 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u>۱</u> ۱) |
| n/a | | retired | |
| Date | Full name of contributor Out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | | | \$50.00 |
| | Contributor address; City; State; Zip Code | | • |
| | | | |
| | | | |
| | Dallas, TX 75252 | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> |
| Counselor | | Self | ·/ |
| | | | |
| | | | |

| The Instru | ction Guide explains how to complete this f | orm. | | Total pages Schedule A1: Sch: 196/228 Rpt: 199/272 | 2 |
|----------------|--|------------------------------|----|---|----------|
| 2 FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | nes (The Honorable) | | | 00081913 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| 06/30/2025 | Tallat-Kelpsa, Kevin | | | | \$100.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | |
| | New York, NY 10023 | | | | |
| | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| Principal | | HVA | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| 06/30/2025 | Tamez, Jeanett | | | | \$25.00 |
| | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | |
| | | | | | |
| | Houston, TX 77089 | | | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| Admin | | Doosan | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| 06/23/2025 | Tang, Hao | | | | \$100.00 |
| | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | |
| | | | | | |
| | Katy, TX 77494 | | | | |
| Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| Banker | | PNC | | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| 06/30/2025 | Taravella, Emily | | | | \$25.00 |
| | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | |
| | | | | | |
| | Nacogdoches, TX 75965 | | | | |
| | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| Counselor | | Nacogdoches ISD | | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Ĺ | Amount of Contribution (\$) | |
| 06/23/2025 | Taylor, Carol | | | | \$50.00 |
| | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | |
| | | | | | |
| | Austin, TX 78737 | | | | |
| | pation / Job title (See Instructions) | Employer (See Instructions | S) | | |
| Not employe | d | Not employed | | | |
| | | | | | |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 197/228 Rpt: 200/272 | 2 |
|---|--------------------|---|------------------------------|----------|---|----------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | |
| | | nes (The Honorable) | | | 00081913 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/23/2025 | Tew, Stephen | | | | \$250.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Houston, TX 77005 | | | | |
| 8 | Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | ;) | | |
| - | Physician | | self | , | | |
| | Date | Full name of contributor Out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Thayer, Sarah | / | | , | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | San Antonio, TX 78217 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Recruiter | | Paramount | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/24/2025 | Thomas, David | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Nashville, TN 37203 | | | | |
| | | ipation / Job title (See Instructions) | Employer (See Instructions | | | |
| | Developmen | .t | Discovery Land Compar | ٦y | | |
| | Date | |) | | Amount of Contribution (\$) | _ |
| | 06/30/2025 | Thomas, Jessica | | | | \$15.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Richmond, CA 94804 | | | | |
| | Princinal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Art Director | | Title 9 Sports Inc. | 9 | | |
| | | Full name of contributor Out-of-state PAC (ID#: | <u> </u> | | Amount of Contribution (\$) | |
| | Date 06/27/2025 | Full name of contributor out-of-state PAC (ID#: Thomas, Ramona |) | | AMOUNT OF CONTINUTION (9) | \$50.00 |
| | 0012112020 | | | | | φυυ.υυ |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Georgetown, TX 78633 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | | | |
| | Not Employe | | Not Employed | | | |
| | | | | | | |
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| The Instru | ction Guide explains how to complete thi | is form. | 1 Total pages Schedule A1: Sch: 198/228 Rpt: 201/272 | |
|----------------|---|-----------------------------|---|------|
| 2 FILER NAME | - | | 3 Filer ID (Ethics Commission Filers) |) |
| Talarico, Jar | mes (The Honorable) | | 00081913 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (II | D#:) | 7 Amount of Contribution (\$) | |
| 06/25/2025 | Thomas-Barry, Margaret | | \$25 | 5.00 |
| | 6 Contributor address; City; State; Zip Code | | ···] | |
| | | | | |
| | Austin, TX 78723 | | | |
| | upation / Job title (See Instructions) | 9 Employer (See Instruction | ns) | |
| Not Employe | ed | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (II | D#:) | Amount of Contribution (\$) | — |
| 06/29/2025 | Thompson, Allison | | \$25 | 00.ذ |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Pflugerville, TX 78660 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | ns) | |
| Not Employe | ed | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (II | D#:) | Amount of Contribution (\$) | |
| 06/23/2025 | Thompson, Allison | | \$25 | 5.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Pflugerville, TX 78660 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instruction | ns) | |
| Not Employe | ed | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (II |) | Amount of Contribution (\$) | |
| 06/30/2025 | Thompson, Erin | | \$25 | 5.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Houston, TX 77059 | | | |
| · · | upation / Job title (See Instructions) | Employer (See Instruction | ns) | |
| School Cour | nselor | Pasadena ISD | | |
| Date | Full name of contributor out-of-state PAC (II | D#:) | Amount of Contribution (\$) | |
| 06/28/2025 | Thompson, Michelle | | \$50 | 0.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Georgetown, TX 78628 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instruction | ns) | |
| Owner | | Platinum Vue Studio | | |
| | | | | |

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|---|----------------|--|------------|-------------------|----|---|-----------|
| | The Instru | ction Guide explains how to complete this | form. | | 1 | Total pages Schedule A1: Sch: 199/228 Rpt: 202/272 | 2 |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | | mes (The Honorable) | | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID# | t: |) | 7 | Amount of Contribution (\$) | |
| | 06/25/2025 | Thorne, George | | | | | \$100.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Dallas, TX 75219 | | | | | |
| 8 | | ipation / Job title (See Instructions) | | (See Instructions | | | |
| | Md | | U texas s | southwestern m | ed | | |
| | Date | Full name of contributor out-of-state PAC (ID# | <i>t</i> : |) | | Amount of Contribution (\$) | |
| | 06/23/2025 | Threadgill, David | | | | | \$250.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | College Station, TX 77845 | | | | | |
| | Principal occu | ipation / Job title (See Instructions) | Employer | (See Instructions | 5) | | |
| | Professor | | Texas A | &M University | | | |
| F | Date | Full name of contributor out-of-state PAC (ID# | |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Tidwell, Sharon | | | | | \$150.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Boerne, TX 78006 | | | | | |
| | Principal occu | ipation / Job title (See Instructions) | | (See Instructions | 5) | | |
| | Accountant | | Scan 13 | | | | |
| | Date | Full name of contributor out-of-state PAC (ID# | #: |) | | Amount of Contribution (\$) | |
| | 06/25/2025 | Tieken, Lynn | | | | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| L | | Henderson, TX 75652 | | | | | |
| | | upation / Job title (See Instructions) | | (See Instructions |) | | |
| | Not Employe | ed | Not Emp | loyed | | | |
| | Date | Full name of contributor out-of-state PAC (ID# | #: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Tilley, Erin | | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | , | | | | |
| | | | | | | | |
| | | | | | | | |
| L | | Woodcreek, TX 78676 | | | | | |
| | | ipation / Job title (See Instructions) | | (See Instructions |) | | |
| | Human cent | ered design | Tyson Fo | oods | | | |
| | | | | | | | |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 200/228 Rpt: 203/272 | |
|---|---------------|---|------------------------------|----|---|---------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission Fi | ilers) |
| | Talarico, Jar | nes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/29/2025 | Tindall, Paul | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Austin, TX 78731 | | | | |
| 8 | | pation / Job title (See Instructions) | 9 Employer (See Instructions | 3) | | |
| | Software En | gineer | goTransverse | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Titterington, Carolyn | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Carrollton, TX 75007 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | :d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Titus, Halen | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Friendswood, TX 77546 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 3) | | |
| L | Registered n | .urse | Common spirit | | | |
| Γ | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Titus, Halen | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| L | | Friendswood, TX 77546 | | L | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| L | Registered n | | Common spirit | _ | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/25/2025 | To, Camlinh | | | | \$22.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| L | | Sugar Land, TX 77479 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 3) | | |
| | Manager | | Harris County | | | |
| | | | | | | |

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|---|----------------|---|------------------------------|----|---|----------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 201/228 Rpt: 204/272 | 2 |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | nes (The Honorable) | | | 00081913 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/29/2025 | Tompkins, Sally | | | | \$10.00 |
| | I | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Georgetown, TX 78633 | | | | |
| 8 | | | 9 Employer (See Instructions | 5) | | |
| | Not Employe | :d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Ī | Amount of Contribution (\$) | |
| | 06/30/2025 | Torres, Nicole | | | | \$25.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Austin, TX 78750 | | | | |
| | Principal occu | ipation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Educator | | Leander ISD | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/29/2025 | Tower, John Houston | | | | \$500.00 |
| | 1 | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Austin, TX 78739 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Attorney | | Houston Tower | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Ī | Amount of Contribution (\$) | |
| | 06/26/2025 | Travis, James | | | | \$500.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Fairview, TX 75069 | | | | |
| | - | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not employe | d | Not employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/29/2025 | Travis, James | | | | \$100.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Fairview, TX 75069 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not employe | d | Not employed | | | |
| | | | | | | |
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| The Instruction Guide exp | lains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 202/228 Rpt: 205/2 | 72 |
|---|-----------------------------------|------------------------------|---|------------|
| 2 FILER NAME | | | 3 Filer ID (Ethics Commissi | on Filers) |
| Talarico, James (The Honorab | le) | | 00081913 | , |
| 4 Date 5 Full name of cor | ntributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) | |
| 06/23/2025 Tree, Everdee | n | | | \$1,000.42 |
| | ess; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| Houston, TX 7 | 7018 | | | |
| 8 Principal occupation / Job title (See | e Instructions) | 9 Employer (See Instructions | | |
| Retired | | Retired | | |
| Date Full name of cor | ntributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 06/29/2025 Tretter, Brook | | | | \$500.00 |
| Contributor addr | ess; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| Colleyville, TX | 76034 | | | |
| Principal occupation / Job title (See | e Instructions) | Employer (See Instructions |) | |
| Managing Director | | SitusAMC | | |
| Date Full name of cor | ntributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 06/23/2025 Trevino, Robe | | | | \$25.00 |
| Contributor addr | ress; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| Georgetown, 1 | TX 78633 | | | |
| Principal occupation / Job title (See | e Instructions) | Employer (See Instructions |) | |
| Not Employed | | Not Employed | | |
| Date Full name of cor | ntributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 06/29/2025 Triplett, Vicki | | | | \$10.00 |
| Contributor addr | ess; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| Garland, TX 7 | | | | |
| Principal occupation / Job title (See | e Instructions) | Employer (See Instructions | | |
| Not Employed | | Not Employed | | |
| Date Full name of cor | ntributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 06/26/2025 Troy, William | | | | \$100.00 |
| Contributor addr | ess; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| Milwaukee, W | | I | | |
| Principal occupation / Job title (See | e Instructions) | Employer (See Instructions |) | |
| Not Employed | | Not Employed | | |
| | | | | |

| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 203/228 Rpt: 206/272 | 2 |
|---|----------------|---|------------------------------|----------------|---|-----------|
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | ı Filers) |
| | | nes (The Honorable) | | | 00081913 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/25/2025 | Tucker, Wendy | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Leander, TX 78641 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | <u> </u> 5) | | |
| | Librarian | | Leander ISD | , | | |
| ╞ | Date | Full name of contributor Out-of-state PAC (ID#:_ | <u> </u>) | Γ | Amount of Contribution (\$) | |
| | 06/23/2025 | Tunstill, William | / | | / mount of contraction (+, | \$527.21 |
| | ••• | | | | | |
| | | | | | | |
| | | | | | | |
| | | Austin, TX 78701 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | ed | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ |) | Γ | Amount of Contribution (\$) | |
| | 06/25/2025 | Turcotte, William | | | • • | \$500.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Houston, TX 77019 | | | | |
| | | ipation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | ;d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Turney, Samantha | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | College Station, TX 77845 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Higher educa | ation | TAMU | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | _ |
| | 06/23/2025 | Turpin, Karen | | | | \$500.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | - · · · | Georgetown, TX 78626 | | Ĺ | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | :d | Not Employed | | | |
| | | | | | | |

| The Instruction Guide explains how to complet | te this form. | 1 Total pages Schedule A1: Sch: 204/228 Rpt: 207/272 | 2 |
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| 2 FILER NAME | | 3 Filer ID (Ethics Commission | n Filers) |
| Talarico, James (The Honorable) | | 00081913 | , |
| 4 Date 5 Full name of contributor out-of-state | PAC (ID#:) | 7 Amount of Contribution (\$) | |
| 06/30/2025 Turpin, Vernita | | | \$10.00 |
| 6 Contributor address; City; State; Zip Code | | | |
| | | | |
| | | | |
| Waco, TX 76712 | | <u> </u> | |
| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions | 3) | |
| Not employed | Not employed | | |
| | PAC (ID#:) | Amount of Contribution (\$) | |
| | | | \$25.00 |
| Contributor address; City; State; Zip Code | | | |
| | | | |
| | | | |
| Austin, TX 78766 | Englis on (Or a lastrochian | \ | |
| Principal occupation / Job title (See Instructions) | Employer (See Instructions Not Employed | 5) | |
| Not Employed | Not Employed | | |
| | PAC (ID#:) | Amount of Contribution (\$) | |
| 06/28/2025 Ulmer, Tedra | | | \$50.00 |
| Contributor address; City; State; Zip Code | | | |
| | | | |
| Brady, TX 76825 | | | |
| Principal occupation / Job title (See Instructions) | Employer (See Instructions |)) | |
| Not Employed | Not Employed |) | |
| | | | |
| | PAC (ID#:) | Amount of Contribution (\$) | ¢500.00 |
| | | | \$500.00 |
| Contributor address; City; State; Zip Code | | | |
| | | | |
| New Orleans, LA 70118 | | | |
| Principal occupation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | |
| Not Employed | Not Employed | <i>''</i> | |
| | | Amount of Contribution (f) | |
| Date Full name of contributor out-of-state 06/23/2025 Ussher, Brian | PAC (ID#:) | Amount of Contribution (\$) | \$1,000.00 |
| | | | φ1,000.00 |
| Contributor address; City; State; Zip Code | | | |
| | | | |
| Houston, TX 77024 | | | |
| Principal occupation / Job title (See Instructions) | Employer (See Instructions |) | |
| Not Employed | Not Employed | <i>''</i> | |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 205/228 Rpt: 208/27 | 72 |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commissio | on Filers) |
| | Talarico, Jar | nes (The Honorable) | | | 00081913 | , |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Ussher, Brian | | | | \$1,000.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | Deinsinglasse | Houston, TX 77024 | | | | |
| 8 | | pation / Job title (See Instructions) | 9 Employer (See Instructions | S) | | |
| | Not Employe | | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Van Hoozer, Christine | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Deerma TV 70000 | | | | |
| | Drineirel eeu | Boerne, TX 78006 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | S) | | |
| | Nutrition | | San Antonio ISD | . | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/23/2025 | Vander Straten, David | |] | | \$500.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Coorrectours TV 70696 | | | | |
| | Drinsipal acqu | Georgetown, TX 78626 | | -> | | |
| | Principal occu Physician | pation / Job title (See Instructions) | Employer (See Instructions UT Austin | S) | | |
| ╞ | | | | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/28/2025 | Vanderbilt, Emily | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Houston, TX 77079 | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Assistant Pri | | Charter school network | | | |
| ╞ | | · | | <u> </u> | | |
| | Date | Full name of contributor out-of-state PAC (ID#:) |) | | Amount of Contribution (\$) | ቀ ጋር 00 |
| | 06/26/2025 | Vanecek, Michelle | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Temple, TX 76502 | | | | |
| ⊢ | Dringingloggy | | Employer (See Instructions | <u> </u> | | |
| | | pation / Job title (See Instructions) earch Coordinator | Employer (See Instructions Baylor Scott & White He | | n | |
| | Cillical Rest | | Daylor Scott & White He | san | 1 | |
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| The Instru | iction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 206/228 Rpt: 209/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/30/2025 | Vaughan, John | | \$50.00 |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| - • • • | Bedford, TX 76021 | | - |
| 8 Principal occu Attorney | upation / Job title (See Instructions) | 9 Employer (See Instructions) Winston & Strawn LLP |) |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | Venezia, Karen | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | Lakeway, TX 78738 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions) |) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Verell, Heather | | \$50.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| D in single and | Dallas, TX 75208 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions) | |
| Radiology | | Methodist Health System | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/23/2025 | Verizzo, Paul | | \$10.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Round Rock, TX 78664 | | |
| Principal occu Not Employe | upation / Job title (See Instructions) ed | Employer (See Instructions) Not Employed |) |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Vetter, Bethany | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Fort Worth, TX 76102 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions) |) |
| Photographe | er | Self | |
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| | The Instru | ction Guide explains how to complete this fo | orm | 1 | Total pages Schedule A1: | |
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| | THE IIISUU | | Jiii. | | Sch: 207/228 Rpt: 210/272 | |
| 2 | FILER NAME | | | | Filer ID (Ethics Commission | Filers) |
| | | nes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | #F0 00 |
| | 06/28/2025 | Villarreal, Christine | | | | \$50.00 |
| | | 6 Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | League City, TX 77573 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | s) | | |
| | Not Employe | d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Vinson, Nancy | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Pontonvillo AD 72712 | | | | |
| | Principal occu | Bentonville, AR 72712 pation / Job title (See Instructions) | Employer (See Instructions | | | |
| | Not Employe | | Not Employed | 5) | | |
| | Date | Full name of contributor out-of-state PAC (ID#: | | 1 | Amount of Contribution (\$) | |
| | 06/30/2025 | Virgadamo, Patricia |) | | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | Bentonville, AR 72712 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Not Employe | | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | * 4 * * * |
| | 06/30/2025 | Viroslav, Hannah | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Evanston, IL 60202 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Doctor | | Hospital | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/23/2025 | Vitale, Lenore | | | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Naples, FL 34109 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 1 s) | | |
| | Realtor | · · · · · · · · · · · · · · · · · · · | Self | , | | |
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| | The Instruction Guide explains how to complete this form. | | | 1 | Total pages Schedule A1: Sch: 208/228 Rpt: 211/27 | 72 |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commissio | on Filers) |
| | Talarico, Jar | nes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Von flatern, Margaret | | | | \$1,000.00 |
| | I | 6 Contributor address; City; State; Zip Code | | | | |
| | | 1 | | | | |
| | | Austin, TX 78756 | | | | |
| 8 | Principal occu Manager | pation / Job title (See Instructions) | 9 Employer (See Instructions) Utility |) | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Voorhees, Justin | | | | \$25.00 |
| | I | Contributor address; City; State; Zip Code | | | | |
| | | 1 | | | | |
| | | | | | | |
| ⊢ | D 1 1 1 1 1 1 1 1 1 1 | Austin, TX 78759 | | Ļ | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions) |) | | |
| L | Compliance | - | DIR | _ | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | ± : 2.00 |
| | 06/29/2025 | Vovk, Jane | | | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | 1 | | | | |
| | | Round Rock, TX 78681 | | | | |
| \vdash | Drincinal occu | pation / Job title (See Instructions) | Employer (See Instructions) | <u> </u> | | |
| | Not Employe | | Not Employed |) | | |
| ╞ | | | , Not Employed | _ | Account of Contribution (¢) | |
| | Date 06/23/2025 | Full name of contributor out-of-state PAC (ID#: W Mulley, Mary |) | | Amount of Contribution (\$) | \$25.00 |
| | 00/23/2023 | | | | | Ψ20.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | 1 | | | | |
| | | San Angelo, TX 76903 | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) | ;) | | |
| | retired | | none | | | |
| ╞ | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/26/2025 | W Mulley, Mary | | | | \$10.00 |
| | I | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | 1 | | | | |
| | | San Angelo, TX 76903 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) | ;) | | |
| | retired | | none | | | |
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| The Instru | iction Guide explains how to complete this f | form. | 1 Total pages Schedule A1: Sch: 209/228 Rpt: 212/272 | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Fi | ilers) |
| Talarico, Ja | mes (The Honorable) | | 00081913 | - |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) | |
| 06/30/2025 | | | | \$20.00 |
| | 6 Contributor address; City; State; Zip Code | | | |
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| | | | | |
| | San Angelo, TX 76903 | | | |
| 8 Principal occi retired | upation / Job title (See Instructions) | 9 Employer (See Instructions) |) | |
| | | none | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | *** 00 |
| 06/28/2025 | | | | \$10.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | San Angelo, TX 76903 | | | |
| Principal occ | upation / Job title (See Instructions) | Employer (See Instructions) | <u> </u> | |
| retired | | none | 1 | |
| | Full name of contributor | | Amount of Contribution (\$) | |
| Date 06/28/2025 | Full name of contributor out-of-state PAC (ID#:_ W Mulley, Mary |) | Amount of Contribution (\$) | \$10.00 |
| 00/20/2023 | | | | ΦT0'00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | San Angelo, TX 76903 | | | |
| Principal occi | upation / Job title (See Instructions) | Employer (See Instructions) |) | |
| retired | | none | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 06/30/2025 | Wadle, Michelle | | | \$25.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| | Austin, TX 78728 | | | |
| | upation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Not Employ | ed | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/30/2025 | Walden-Berg, David | | | \$25.00 |
| | Contributor address; City; State; Zip Code | | | |
| | | | | |
| | | | | |
| D in single and | Palm Springs, CA 92264 | | <u></u> | |
| | upation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Not Employ | ea | Not Employed | | |
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| т | he Instru | ction Guide explains how to comp | plete this for | rm. | 1 | Total pages Schedule A1: Sch: 210/228 Rpt: 213/272 | |
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| 2 F | ILER NAME | | | | 3 | Filer ID (Ethics Commission I | Filers) |
| | | nes (The Honorable) | | | | 00081913 | - , |
| 4 D | Date | 5 Full name of contributor out-of-st | state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| 0 | 6/30/2025 | Wallace, Janice | | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Co | | | | | |
| | | 1 | | | | | |
| | | Georgetown, TX 78628 | | | | | |
| 8 P | rincipal occu | pation / Job title (See Instructions) | 9 | Employer (See Instructions | :) | | |
| | lot Employe | | | Not Employed | , | | |
| | Date | | |) | | Amount of Contribution (\$) | |
| | 6/30/2025 | Wang, Eric | | | | | \$25.00 |
| | 010012020 | Contributor address; City; State; Zip Co | | | | | Ψ20.00 |
| | | Continuation address, City, State, Zip Con | Jue | | | | |
| | | | | | | | |
| | | Cypress, TX 77433 | | | | | |
| Р | rincipal occu | pation / Job title (See Instructions) | | Employer (See Instructions | | | |
| | nalytics | | | Pfizer | | | |
| D | Date | Full name of contributor out-of-si | state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 6/25/2025 | Ward, Becky | | ······································ | | | \$10.00 |
| | | Contributor address; City; State; Zip Co | | | | | - |
| | | | | | | | |
| | | | | | | | |
| | | Austin, TX 78704 | | | | | |
| Р | rincipal occu | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| N | lot Employe | ;d | | Not Employed | | | |
| D | Date | Full name of contributor out-of-st | state PAC (ID#: |) | | Amount of Contribution (\$) | |
| 0 | 6/30/2025 | Ward, Tricia | | | | | \$5.00 |
| | | Contributor address; City; State; Zip Co | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Marysville, WA 98270 | | | | | |
| | • | pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| Ч | Petsitter | | | Self employed | | | |
| | Date | | state PAC (ID#: |) | | Amount of Contribution (\$) | |
| 0 | 6/30/2025 | Warnock, Lindseigh | | | | | \$50.00 |
| | | Contributor address; City; State; Zip Co | | | | | |
| | | 1 | | | | | |
| | | | | | | | |
| Ļ | | Azle, TX 76020 | <u> </u> | (O = a la struction - | Ļ | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions Texas health resources | 5) | | |
| к | RN | | | Texas nealur resources | | | |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 211/228 Rpt: 214/272 |
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| 2 | FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| | Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| | 06/30/2025 | Wasko, Susan | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 |
| | | | | |
| | | | | |
| Ļ | | Marietta, GA 30062 | 1 | |
| 8 | | upation / Job title (See Instructions) | 9 Employer (See Instructions | s) |
| | Not Employe | | Not Employed | |
| | Date | |) | Amount of Contribution (\$) |
| | 06/29/2025 | Watson, Laura | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | Katy, TX 77493 | | |
| ┝ | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | ~\ |
| | Teacher | | SBISD | 5) |
| ╞ | | | | A mount of Contribution (\$) |
| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#: Watson, Sara |) | Amount of Contribution (\$) \$25.00 |
| | 00/30/2023 | | | ψ20.00 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | Austin, TX 78753 | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| | Director | | Austin community found | dation |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/30/2025 | Watt, Christen | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | 1 |
| | | | | |
| | | | | |
| | | Richardson, TX 75080 | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | S) |
| | Substitute Te | | RISD | . |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| | 06/29/2025 | Watts, Carol | | \$10.00 |
| | | Contributor address; City; State; Zip Code | | |
| | | | | |
| | | Austin, TX 78704 | | |
| ⊢ | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| | Not Employe | | Not Employed | ., |
| ⊢ | | <u> </u> | | |
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| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 212/228 Rpt: 215/272 | |
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| 2 | FILER NAME | | i | 3 | Filer ID (Ethics Commission F | Filers) |
| | Talarico, Jar | nes (The Honorable) | ! | | 00081913 | |
| 4 | | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/26/2025 | Watts, Carol | | ĺ | | \$10.00 |
| | I | 6 Contributor address; City; State; Zip Code | | ĺ | | |
| | I | | ļ | ĺ | | |
| | | Austin, TX 78704 | | | | |
| 8 | Principal occu Not Employe | | 9 Employer (See Instructions) Not Employed |) | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Weaser, Audra | ļ | ĺ | | \$50.00 |
| | I | Contributor address; City; State; Zip Code | 1 | ĺ | | |
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| L | Driveinel aco | Los Angeles, CA 90042 | | Ĺ | | |
| | Principal occu Artist | pation / Job title (See Instructions) | Employer (See Instructions) Self | .) | | |
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| | Date 06/30/2025 | Full name of contributor out-of-state PAC (ID#:) |) | ĺ | Amount of Contribution (\$) | ቀንፍ ባበ |
| | 06/30/2025 | Contributor address: City: State: Zin Code | Į | l | | \$25.00 |
| | I | Contributor address; City; State; Zip Code | ļ | ĺ | | |
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| | I | Nolensville, TN 37135 | ļ | ĺ | | |
| | Principal occu | I pation / Job title (See Instructions) | Employer (See Instructions) | ;) | | |
| | Sales | | McKesson | | | |
| F | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/28/2025 | Weir, Laura | | ĺ | | \$10.00 |
| | I | Contributor address; City; State; Zip Code | | ĺ | | |
| | I | | ļ | ĺ | | |
| | | Rockaway, NJ 07866 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions) | ;) | | |
| | Not Employe | d | Not Employed | | | |
| ╞ | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Weise, Derek | | ĺ | | \$50.00 |
| | I | Contributor address; City; State; Zip Code | | ĺ | | |
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| L | | Austin, TX 78758 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions) |) | | |
| L | Engineer | J | Apple | | | |
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| The Instru | iction Guide explains how to complete this fo | orm. | 1 Total pages Schedule A1: Sch: 213/228 Rpt: 216/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Ja | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/23/2025 | Weiss, Mark | | \$50.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | Austin, TX 78703 | | |
| 8 Principal occ | upation / Job title (See Instructions) | 9 Employer (See Instructions | s) |
| Retired | | None | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | | | \$10.00 |
| | Contributor address; City; State; Zip Code | | |
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| | Sumas, WA 98295 | | |
| Principal occ | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| Not Employ | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/23/2025 | Welsh, Linda | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | Austin, TX 78728 | | |
| Principal occ | upation / Job title (See Instructions) | Employer (See Instructions | 5) |
| Consultant | 1 | Linda Welsh | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | Wentz, Zenaida | | \$10.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | | | |
| | San Antonio, TX 78245 | | |
| Principal occ | upation / Job title (See Instructions) | Employer (See Instructions | s) |
| Teacher | 1 | Northside ISD | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | Wentz, Zenaida | | \$10.00 |
| | Contributor address; City; State; Zip Code | | |
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| | | | |
| | San Antonio, TX 78245 | | |
| Principal occ | upation / Job title (See Instructions) | Employer (See Instructions | 5) |
| Teacher | | Northside ISD | |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 214/228 Rpt: 217/272 | 2 |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | Talarico, Jar | mes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/26/2025 | Westbrook, Larry | | | | \$100.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | Mckinney, TX 75071 | | | | |
| 8 | | | 9 Employer (See Instructions | 5) | | |
| | Programmer | | Merck Animal Health | | | |
| Γ | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Westmoreland, Casey | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | ł | | I |
| | | | | | | |
| | | Abilene, TX 79605 | | | | |
| ⊢ | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | רי בי | | |
| | School psyc | | ESC14 | <i>י</i> י | | |
| ⊨ | | | <u> </u> | Γ | Amount of Contribution (\$) | |
| | Date 06/30/2025 | |) | | Amount of Contribution (\$) | \$5.00 |
| | 00/30/2023 | Wetterauer, Carol | | | | Φ0.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | Katy, TX 77450 | | _ | | |
| Γ | | ipation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | ed | Not Employed | _ | | |
| F | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/29/2025 | Whellan, Michael | | | | \$500.00 |
| | | Contributor address; City; State; Zip Code | | ł | | |
| | | | | | | |
| | | | | | | |
| L | | Austin, TX 78731 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | · | | |
| L | Attorney | | Armbrust & Brown PLLC | с | | |
| Γ | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/26/2025 | Wherry, Jennifer | | | | \$20.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Carbondale, CO 81623 | | | | |
| ⊢ | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | ∟ s) | | |
| | Attorney | parent, 200 and (, | Alpine Legal Services | •, | | |
| ⊢ | - | | | | | |
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| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 215/228 Rpt: 218/272 | 2 |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | ı Filers) |
| | Talarico, Jar | mes (The Honorable) | I | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Whitcomb, Holly | | | | \$50.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | 1 | I | | | |
| | | Morrill, ME 04952 | | | | |
| 8 | | | 9 Employer (See Instructions | s) | | |
| | HealthcareIT | | athenahealth | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/25/2025 | White, Cary | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
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| L | | Belvedere Tiburon, CA 94920 | | | | |
| | | upation / Job title (See Instructions) | Employer (See Instructions | | | |
| L | Insurance Br | oker | ISU Insurance Services | ; 01 | San Francisco | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | T | Amount of Contribution (\$) | |
| | 06/30/2025 | White, Ian | | | | \$5.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | 1 | I | | | |
| | | | I | | | |
| ┝ | Dringing ogg | Granville, OH 43023 | Employer (Cool Instruction) | <u> </u> | | |
| | Engineer | upation / Job title (See Instructions) | Employer (See Instructions AEP | 5) | | |
| ╘ | | | | — | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | * 50.00 |
| | 06/29/2025 | White, Sandra | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | 1 | l | | | |
| | | Austin, TX 78759 | l | | | |
| ⊢ | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u>ار</u> (۱ | | |
| | Not Employe | | Not Employed | 3) | | |
| ⊨ | Date | | | T | Amount of Contribution (\$) | |
| | 06/29/2025 | Full name of contributor out-of-state PAC (ID#: Whitlow, Stuart | / | | | \$100.00 |
| | 0012512020 | | | | | Ψ100.00 |
| | | Contributor address; City; State; Zip Code | l | | | |
| | | 1 | I | | | |
| | | Austin, TX 78755 | | | | |
| ⊢ | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | ⊥ | | |
| | Attorney | | Self-employed | -, | | |
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| The Instru | iction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 216/228 Rpt: 219/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Jar | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) |
| 06/25/2025 | | | \$100.00 |
| | 6 Contributor address; City; State; Zip Code | | |
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| | Austin, TX 78729 | | |
| 8 Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions) |) |
| Diabetes Nu | Irse | Diabetes and Nutrition P | Partners LLC |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | Wiewel, Sam | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
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| | | | |
| | Austin, TX 78756 | | |
| - | upation / Job title (See Instructions) | Employer (See Instructions) |) |
| Analyst | | WeLocalize | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | Wigginton, Elizabeth | | \$100.00 |
| | Contributor address; City; State; Zip Code | | |
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| | | | |
| Driv singlages | Houston, TX 77055 | | |
| Principal occu Homemaker | upation / Job title (See Instructions) r | Employer (See Instructions) | |
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| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Williams, Erika | | \$50.00 |
| | Contributor address; City; State; Zip Code | | |
| | | | |
| | Fort Lauderdale, FL 33305 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions |)) |
| Director | | Clusiaco | 7 |
| Date | Full name of contributor out-of-state PAC (ID#:_ | | Amount of Contribution (\$) |
| 06/23/2025 | | | \$25.00 |
| 00/20/2020 | Contributor address; City; State; Zip Code | | +_0.00 |
| | Continuou audress, City, State, Zip Code | | |
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| | Richardson, TX 75081 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions) |) |
| Not Employe | ed | Not Employed | |
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| | The Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 217/228 Rpt: 220/272 | <u> </u> |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | | nes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID# | #:) | 7 | Amount of Contribution (\$) | |
| | 06/26/2025 | Williams, John | | | | \$25.00 |
| | I | 6 Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | Austin, TX 78731 | | | | |
| 8 | | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Not Employe | .d | Not Employed | | | |
| F | Date | Full name of contributor out-of-state PAC (ID# | #:) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Williams, Josh | | | | \$25.00 |
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| | | Cedar Park, TX 78613 | | | | |
| ⊢ | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | L s) | | |
| | Kids & Famil | | Austin Mustard Seed | -, | | |
| ╞ | | - | | | Associated Contribution (\$) | |
| | Date | | #:) | | Amount of Contribution (\$) | <u> </u> |
| | 06/25/2025 | Williamson, Ellen | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
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| | | Irving, TX 75039 | | | | |
| | | ipation / Job title (See Instructions) | Employer (See Instructions | | | |
| | Attorney | | Ellen Williamson Law P | С | | |
| F | Date | Full name of contributor out-of-state PAC (ID# | #:) | T | Amount of Contribution (\$) | |
| | 06/24/2025 | Wilson, Dena | | | | \$100.00 |
| | I | Contributor address; City; State; Zip Code | | | | |
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| | | Llano, TX 78643 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | Librarian | | Llano ISD | | | |
| ⊨ | Date | Full name of contributor out-of-state PAC (ID# | | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Wilson, Elizabeth | | | | \$25.00 |
| | - | Contributor address; City; State; Zip Code | | • | | |
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| | | Denver, CO 80212 | | | | |
| \vdash | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | \sum_{n} | | |
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| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 218/228 Rpt: 221/272 | |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| | Talarico, Jar | nes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/29/2025 | Wilson, Richard B | | | | \$25.00 |
| | I | 6 Contributor address; City; State; Zip Code | ······ | 1 | | |
| | l | | | | | |
| | | Clermont, FL 34711 | | | | |
| 8 | | · · · · | 9 Employer (See Instructions | 5) | | |
| | Not Employe | :d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/23/2025 | Wilson, Scott | ļ | | | \$50.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
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| | | Coppell, TX 75019 | | | | |
| | - | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Founder | | B2HLabs | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/26/2025 | Wilson, Walter | | | | \$100.00 |
| | 1 | Contributor address; City; State; Zip Code | | 1 | | |
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| | | Cedar Park, TX 78613 | | | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | .d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | Winchell, Julia | | | | \$50.00 |
| | I | Contributor address; City; State; Zip Code | 1 | 1 | | |
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| | I | | | | | |
| | | Arlington, WA 98223 | | Ļ | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 3) | | |
| | Not Employe | | Not Employed | _ | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Witt, Jill | | | | \$100.00 |
| | I | Contributor address; City; State; Zip Code | |] | | |
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| | - · · · | Austin, TX 78759 | | Ĺ | | |
| | | pation / Job title (See Instructions) | Employer (See Instructions | 3) | | |
| L | Strategy Cor | isultant | Dell Technogies | | | |
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| The Instruc | tion Guide explains how | <i>i</i> to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 219/228 Rpt: 222/272 | |
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| 2 FILER NAME | | | | 3 | Filer ID (Ethics Commission I | Filers) |
| | es (The Honorable) | | | | 00081913 | |
| 4 Date | 5 Full name of contributor | out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| 06/30/2025 | Wolfe, Christy | | | | | \$25.00 |
| ľ | 6 Contributor address; City; St | tate; Zip Code | | | | |
| | | | | | | |
| | Cedar Creek, TX 78612 | | | | | |
| | pation / Job title (See Instructions | 3) | 9 Employer (See Instructions | s) | | |
| Not Employee | t | | Not Employed | | | |
| Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Γ | Amount of Contribution (\$) | |
| 06/30/2025 | Woodruff, David | | | | | \$50.00 |
| ŀ | Contributor address; City; St | | | · | | |
| | | | | | | |
| | | | | | | |
| | Austin, TX 78703 | | | | | |
| | | <u>``</u> | Employer (See Instructions | s) | | |
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| Editor Date | Full name of contributor | 5) | State Auditor's Office | Τ | Amount of Contribution (\$) | \$25.00 |
| Editor | Full name of contributor Wooten, Rachel | out-of-state PAC (ID#:_ | State Auditor's Office | | Amount of Contribution (\$) | \$25.00 |
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| Editor Date | Full name of contributor Wooten, Rachel | out-of-state PAC (ID#:_ | State Auditor's Office | | Amount of Contribution (\$) | \$25.00 |
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| Editor Date 06/30/2025 | Full name of contributor Wooten, Rachel Contributor address; City; St Missouri City, TX 77459 | out-of-state PAC (ID#:_ tate; Zip Code | State Auditor's Office | | | \$25.00 |
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| Editor Date 06/30/2025 Principal occup Paralegal Date | Full name of contributor Wooten, Rachel Contributor address; City; St Missouri City, TX 77459 pation / Job title (See Instructions Full name of contributor Worrell, Mark | tate; Zip Code | State Auditor's Office | | obinson LLP | |
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| Editor Date 06/30/2025 Principal occup Paralegal Date | Full name of contributor Wooten, Rachel Contributor address; City; St Missouri City, TX 77459 pation / Job title (See Instructions Full name of contributor Worrell, Mark | tate; Zip Code | State Auditor's Office | | obinson LLP | |
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| Editor Date 06/30/2025 Principal occup Paralegal Date 06/30/2025 Principal occup | Full name of contributor Wooten, Rachel Contributor address; City; St Missouri City, TX 77459 Dation / Job title (See Instructions Full name of contributor Worrell, Mark Contributor address; City; St San Antonio, TX 78240 | out-of-state PAC (ID#:_ tate; Zip Code out-of-state PAC (ID#:_ out-of-state PAC (ID#:_ tate; Zip Code | State Auditor's Office | R | obinson LLP | |
| Editor Date 06/30/2025 Principal occup Paralegal Date 06/30/2025 Principal occup Training | Full name of contributor Wooten, Rachel Contributor address; City; St Missouri City, TX 77459 Dation / Job title (See Instructions Full name of contributor Worrell, Mark Contributor address; City; St San Antonio, TX 78240 Dation / Job title (See Instructions Full name of contributor Worst, Nancy | out-of-state PAC (ID#:_ tate; Zip Code out-of-state PAC (ID#:_ tate; Zip Code out-of-state PAC (ID#:_ | State Auditor's Office | R | obinson LLP Amount of Contribution (\$) | |
| Editor Date 06/30/2025 Principal occur Paralegal Date 06/30/2025 Principal occur Training Date | Full name of contributor Wooten, Rachel Contributor address; City; St Missouri City, TX 77459 Dation / Job title (See Instructions Full name of contributor Worrell, Mark Contributor address; City; St San Antonio, TX 78240 Dation / Job title (See Instructions Full name of contributor Worst, Nancy | out-of-state PAC (ID#:_ tate; Zip Code out-of-state PAC (ID#:_ tate; Zip Code code out-of-state PAC (ID#:_ | State Auditor's Office | R | obinson LLP Amount of Contribution (\$) | \$25.00 |
| Editor Date 06/30/2025 Principal occur Paralegal Date 06/30/2025 Principal occur Training Date | Full name of contributor Wooten, Rachel Contributor address; City; St Missouri City, TX 77459 Dation / Job title (See Instructions Full name of contributor Worrell, Mark Contributor address; City; St San Antonio, TX 78240 Dation / Job title (See Instructions Full name of contributor Worst, Nancy | out-of-state PAC (ID#:_ tate; Zip Code out-of-state PAC (ID#:_ tate; Zip Code code out-of-state PAC (ID#:_ | State Auditor's Office | R | obinson LLP Amount of Contribution (\$) | \$25.00 |
| Editor Date 06/30/2025 Principal occur Paralegal Date 06/30/2025 Principal occur Training Date | Full name of contributor Wooten, Rachel Contributor address; City; St Missouri City, TX 77459 Dation / Job title (See Instructions Full name of contributor Worrell, Mark Contributor address; City; St San Antonio, TX 78240 Dation / Job title (See Instructions Full name of contributor Worst, Nancy | out-of-state PAC (ID#:_ tate; Zip Code out-of-state PAC (ID#:_ tate; Zip Code code out-of-state PAC (ID#:_ | State Auditor's Office | R | obinson LLP Amount of Contribution (\$) | \$25.00 |
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| Editor Date 06/30/2025 Principal occur Paralegal Date 06/30/2025 Principal occur Training Date 06/23/2025 | Full name of contributor Wooten, Rachel Contributor address; City; St Missouri City, TX 77459 Dation / Job title (See Instructions Full name of contributor Worrell, Mark Contributor address; City; St San Antonio, TX 78240 Dation / Job title (See Instructions Full name of contributor Worst, Nancy Contributor address; City; St | <pre>out-of-state PAC (ID#:_ tate; Zip Code out-of-state PAC (ID#:_ tate; Zip Code out-of-state PAC (ID#:_ tate; Zip Code </pre> | State Auditor's Office | s Ro | obinson LLP Amount of Contribution (\$) | \$25.00 |

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| The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1: Sch: 220/228 Rpt: 223/272 |
| 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Talarico, James (The Honorable) | 00081913 |
| 4 Date 5 Full name of contributor out-of-state PAC (ID#:) | 7 Amount of Contribution (\$) |
| 06/30/2025 Wright, Freda | \$25.00 |
| 6 Contributor address; City; State; Zip Code | |
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| | |
| Plano, TX 75024 | |
| 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) | is) |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/24/2025 Wukasch, Susan | \$25.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Georgetown, TX 78628 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | s) |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/25/2025 Wynkoop, Timothy | \$20.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Beaumont, TX 77707 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | s) |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/29/2025 Wynkoop, Timothy | \$25.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Beaumont, TX 77707 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | s) |
| Not Employed Not Employed | |
| Date Full name of contributor out-of-state PAC (ID#:) | Amount of Contribution (\$) |
| 06/27/2025 Yackle, Cris | \$10.00 |
| Contributor address; City; State; Zip Code | |
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| | |
| Eureka Springs, AR 72632 | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | s) |
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| The Instru | iction Guide explains how to complete this f | form. | 1 Total pages Schedule A1: Sch: 221/228 Rpt: 224/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
| Talarico, Ja | mes (The Honorable) | | 00081913 |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/29/2025 | Yagjian, Marc | | \$100.00 |
| | 6 Contributor address; City; State; Zip Code | | 1 |
| | | | |
| | Austin, TX 78730 | | |
| 8 Principal occ | upation / Job title (See Instructions) | 9 Employer (See Instructions | s) |
| venture cap | ital | Origin Partners | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Yates, Kayla | | \$25.00 |
| | Contributor address; City; State; Zip Code | | 1 |
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| | | | |
| | Cypress, TX 77429 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | a) |
| College stud | Jent | My husbands wife | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/25/2025 | Yee, Gary | | \$50.00 |
| | Contributor address; City; State; Zip Code | | 1 |
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| | | | |
| | Oakland, CA 94619 | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | 3) |
| Not Employ | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Yi, Home | | \$50.00 |
| | Contributor address; City; State; Zip Code | |] |
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| | Plano, TX 75025 | | |
| Principal occ | upation / Job title (See Instructions) | Employer (See Instructions | |
| TPM | | Microsoft | <i>,</i> , |
| | Full name of contributor Out-of-state PAC (ID#: | | 1 Amount of Contribution (\$) |
| Date 06/28/2025 | |) | Amount of Contribution (\$) \$100.00 |
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| | Contributor address; City; State; Zip Code | | |
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| | San Antonio, TX 78258 | | |
| Principal occ | upation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) |
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| The Instru | iction Guide explains how to complete this f | orm. | 1 Total pages Schedule A1: Sch: 222/228 Rpt: 225/272 |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Filers) |
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| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) |
| 06/30/2025 | Zamarron, Ebone | | \$25.00 |
| | 6 Contributor address; City; State; Zip Code | | |
| | | | |
| | Austin, TX 78745 | | <u> </u> |
| 8 Principal occu Teacher | upation / Job title (See Instructions) | 9 Employer (See Instructions AISD | ;) |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/28/2025 | Zeitlin, Paula | | \$15.00 |
| | Contributor address; City; State; Zip Code | | |
| | Newton, MA 02460 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | ;) ;) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Zia, Emad | | \$15.00 |
| | Contributor address; City; State; Zip Code | | |
| | Diana TV 75075 | | |
| Drippinglagg | Plano, TX 75075 | Employer (See Instructions | |
| Not Employe | upation / Job title (See Instructions) ed | Not Employed | ·) |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) |
| 06/30/2025 | Zieb, Jurgen | | \$25.00 |
| | Contributor address; City; State; Zip Code | | |
| | Edgewood, NM 87015 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u>ا</u> ۵) |
| Not Employe | ed | Not Employed | |
| Date | Full name of contributor Out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/30/2025 | Zielinski, Zachary | | \$50.00 |
| | Contributor address; City; State; Zip Code | | • |
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| | | | |
| | Spring, TX 77381 | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | \$) |
| IT Server En | ıgineer | ExxonMobil | |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 223/228 Rpt: 226/272 | |
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| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
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| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | Zintgraff, Debra | | | | \$50.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | | |
| | | San Antonio, TX 78256 | | | | |
| 8 | Principal occu | ipation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Data Quality | Analyst | USAA | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | Zuloaga, Debra | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
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| | | | | | | |
| | | El Paso, TX 79924 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Kitchen desi | gner | Lowes | | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | babida, alexandra | | | | \$25.00 |
| | | Contributor address; City; State; Zip Code | | | | |
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| | | | | | | |
| | | Mansfield, TX 76063 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Channel mai | nager | Samsung | | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | bailey, heather | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | | | |
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| | | | | | | |
| | | Austin, TX 78703 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | consultant | | Self | | | |
| F | Date | Full name of contributor out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| | 06/30/2025 | beard, richard | | | | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | | | | | |
| | | San Francisco, CA 94114 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | architect | | richard beard architects | | | |
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| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 224/228 Rpt: 227/272 | 2 |
| 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission | Filers) |
| - | | nes (The Honorable) | | | 00081913 | |
| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| | 06/23/2025 | bearden, tim | | | | \$50.00 |
| | I | 6 Contributor address; City; State; Zip Code | | 1 | | |
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| | | Spicewood, TX 78669 | | | | |
| 8 | | | 9 Employer (See Instructions | 3) | | |
| | Not Employe | .d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/26/2025 | bearden, tim | | | | \$10.00 |
| | 1 | Contributor address; City; State; Zip Code | | 1 | | |
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| | I | Spicewood, TX 78669 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u>.</u> 3) | | |
| | Not Employe | d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Γ | Amount of Contribution (\$) | |
| | 06/30/2025 | blanchette farrell, genevieve | | | | \$15.00 |
| | I | Contributor address; City; State; Zip Code | | 1 | | |
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| | I | 1 | | | | |
| | I | Burleson, TX 76028 | | | | |
| | Principal occu | I pation / Job title (See Instructions) | Employer (See Instructions | ⊥ 3) | | |
| | Not Employe | | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: | | Π | Amount of Contribution (\$) | |
| | 06/29/2025 | brody, robert | / | | | \$5.00 |
| | 00/20/2020 | - | | - | | Ψ0.00 |
| | I | Contributor address; City; State; Zip Code | | | | |
| | I | 1 | | | | |
| | I | East Hampton, NY 11937 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | L 5) | | |
| | Not employe | | Not employed | -, | | |
| | Date | | | — | Amount of Contribution (\$) | |
| | 06/30/2025 | Full name of contributor out-of-state PAC (ID#: carpenter, jeremy | / | | | \$100.00 |
| | 00/30/2023 | | | - | | Φ100.00 |
| | I | Contributor address; City; State; Zip Code | | | | |
| | I | 1 | | | | |
| | I | Dallas, TX 75223 | | | | |
| | Dringinal occu | l | Employor (Soo Instructions | | | |
| | Principal occu VP | pation / Job title (See Instructions) | Employer (See Instructions TPS | 3) | | |
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| The Instruction Guide e | explains how to comple | te this form. | 1 Total pages Schedule A1: Sch: 225/228 Rpt: 228/272 | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission File | rs) |
| Talarico, James (The Honor | rable) | | 00081913 | -, |
| 4 Date 5 Full name of | contributor out-of-state | PAC (ID#:) | 7 Amount of Contribution (\$) | |
| 06/28/2025 chandler, L | isa | | \$ | 20.00 |
| 6 Contributor a | address; City; State; Zip Code | | | |
| | | | | |
| Murchison, | TX 75778 | | | |
| 8 Principal occupation / Job title (| (See Instructions) | 9 Employer (See Instruction | s) | |
| Not Employed | | Not Employed | | |
| Date Full name of | contributor out-of-state | PAC (ID#:) | Amount of Contribution (\$) | |
| 06/30/2025 de la Fuent | | | \$1 | 50.00 |
| Contributor a | address; City; State; Zip Code | | | |
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| Austin, TX | 78759 | | | |
| Principal occupation / Job title (| (See Instructions) | Employer (See Instruction | s) | |
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| Date Full name of | contributor out-of-state | PAC (ID#:) | Amount of Contribution (\$) | |
| 06/23/2025 falkstein, fra | | | \$10 | .00.00 |
| Contributor a | address; City; State; Zip Code | | | |
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| Austin, TX | | | | |
| Principal occupation / Job title (| (See Instructions) | Employer (See Instruction | s) | |
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| Date Full name of | contributor out-of-state | PAC (ID#:) | Amount of Contribution (\$) | |
| 06/28/2025 funderburk, | - | | \$ | 25.00 |
| Contributor a | address; City; State; Zip Code | | | |
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| Arlington, T | TX 76016 | | | |
| Principal occupation / Job title (| (See Instructions) | Employer (See Instruction | s) | |
| Owner | | LandPatterns Inc. | | |
| Date Full name of | contributor out-of-state | PAC. (ID#:) | Amount of Contribution (\$) | |
| 06/23/2025 gregory, eli | | | | .00.00 |
| | address; City; State; Zip Code | | | - |
| | aalooo, e.y, e, <u>-</u> , | | | |
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| Houston, T | X 77030 | | | |
| Principal occupation / Job title (| (See Instructions) | Employer (See Instruction | s) | |
| Teacher | | UH | | |
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| The Instruc | ction Guide explains how to complete this fo | orm. | 1 Total pages Schedule A1: Sch: 226/228 Rpt: 229/272 | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission Fi | lers) |
| Talarico, Jarr | nes (The Honorable) | | 00081913 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) | |
| 06/30/2025 | jones, carl | | | \$20.00 |
| | 6 Contributor address; City; State; Zip Code | | | |
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| | o : | | | |
| 2 Dringing oppu | Spicewood, TX 78669 | | | |
| 8 Principal occup Not employed | pation / Job title (See Instructions) | 9 Employer (See Instructions) Not employed | 1 | |
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| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | ÷== 00 |
| 06/25/2025 | | | | \$50.00 |
| | Contributor address; City; State; Zip Code | | | |
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| | Katy, TX 77450 | | | |
| Principal occur | pation / Job title (See Instructions) | Employer (See Instructions) | <u> </u> | |
| CEO / CTO | | J Kauffman | ! | |
| Date | Full name of contributor out-of-state PAC (ID#: | <u> </u> | Amount of Contribution (\$) | |
| 06/23/2025 | Full name of contributor out-of-state PAC (ID#: krist, kim | / | Amount of Contribution (\$) | 250.00 |
| 00/23/2023 | · | | Ψ | 230.00 |
| | Contributor address; City; State; Zip Code | | | |
| | l | | | |
| | Houston, TX 77062 | | | |
| Principal occur | pation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Not Employe | d | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/30/2025 | maley, lorraine | | | \$25.00 |
| | Contributor address; City; State; Zip Code | | | |
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| | | | | |
| | New Richmond, OH 45157 | <u> </u> | | |
| | pation / Job title (See Instructions) | Employer (See Instructions) |) | |
| Teacher | | Public School | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/29/2025 | mccurtis, deborah | | | \$10.00 |
| | Contributor address; City; State; Zip Code | | | |
| | l | | | |
| | Leander, TX 78641 | | | |
| Principal occur | pation / Job title (See Instructions) | Employer (See Instructions) | 1 | |
| Not Employe | | Not Employed | ! | |
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| The Instru | ction Guide explains how to complete this f | form. | 1 Total pages Schedule A1: Sch: 227/228 Rpt: 230/272 | |
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| 2 FILER NAME | | | 3 Filer ID (Ethics Commission File | ers) |
| Talarico, Jai | mes (The Honorable) | | 00081913 | |
| 4 Date | 5 Full name of contributor out-of-state PAC (ID#: |) | 7 Amount of Contribution (\$) | |
| 06/30/2025 | owens, marissa | | \$20.00 | |
| | 6 Contributor address; City; State; Zip Code | | | |
| | | | | |
| | Lewisville, TX 75067 | | | |
| 8 Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | <u>ا</u> ۶) | |
| Hospitality | • | Marriott | , | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 06/29/2025 | peachey, dorinda | / | | \$50.00 |
| 00/20/2022 | Contributor address; City; State; Zip Code | | | φου.υ. |
| | Continuutor address, City, State, Zip Code | | | |
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| | San Antonio, TX 78218 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | <u>ا</u> ٤) | |
| Sales | | Avon | | |
| Date | Full name of contributor out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) | |
| 06/30/2025 | rose, leilani | | | \$50.00 |
| | Contributor address; City; State; Zip Code | | | |
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| | | | | |
| | Austin, TX 78753 | | | |
| Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | \$) | |
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| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/25/2025 | rouk, terry | | 5 | \$25.00 |
| | Contributor address; City; State; Zip Code | | | |
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| | Whitesboro, TX 76273 | | | |
| | upation / Job title (See Instructions) | Employer (See Instructions | s) | |
| Not Employe | ed | Not Employed | | |
| Date | Full name of contributor out-of-state PAC (ID#: |) | Amount of Contribution (\$) | _ |
| 06/23/2025 | shanklin-spock, heidi | | | \$25.00 |
| | Contributor address; City; State; Zip Code | | | |
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| Di indaan | Austin, TX 78735 | | <u> </u> | |
| | upation / Job title (See Instructions) | Employer (See Instructions | \$) | |
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| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 228/228 Rpt: 231/272 | |
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| 2 | FILER NAME | | | 2 | Filer ID (Ethics Commission | Filers) |
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| 4 | Date | 5 Full name of contributor out-of-state PAC (ID#:_ |) | 7 | Amount of Contribution (\$) | |
| | 06/30/2025 | shepherd, julianne | | | | \$25.00 |
| | | 6 Contributor address; City; State; Zip Code | | 1 | | |
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| | | | | | | |
| | | Georgetown, TX 78628 | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Not Employe | d | Not Employed | | | |
| | Date | Full name of contributor out-of-state PAC (ID#: |) | Г | Amount of Contribution (\$) | |
| | 06/25/2025 | sosa, guadalupe | / | | /ouni of continuation (+) | \$50.00 |
| | 00/20/2020 | | | | | Φ00.00 |
| | | Contributor address; City; State; Zip Code | | | | |
| | | | | | | |
| | | Austin, TX 78704 | | | | |
| _ | Bringinal occu | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | Not employe | | Not employed | 5) | | |
| | | | Not employed | _ | | |
| | Date | Full name of contributor out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | |
| | 06/26/2025 | stitts, randal | | | | \$100.00 |
| | | Contributor address; City; State; Zip Code | | 1 | | |
| | | | | | | |
| | | | | | | |
| | | Georgetown, TX 78633 | | | | |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Not Employe | d | Not Employed | | | |
| ⊨ | Date | Full name of contributor Out-of-state PAC (ID#: | | Г | Amount of Contribution (\$) | |
| | 06/30/2025 | | / | | (1) | \$500.00 |
| | 00/00/2020 | Contributor address; City; State; Zip Code | | ł | | +000.00 |
| | | Contributor address, City, State, Zip Code | | | | |
| | | | | | | |
| | | Austin, TX 78731 | | | | |
| ⊢ | Principal occur | pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> | | |
| | • | pation / Job title (See Instructions) | | 5) | | |
| | Librarian | | State of Texas | | | |
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| | | EXPENDITURE CATEGORIES FOR BOX 8(a) | |
|---|---|---|---|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | |
| 1 | Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| | Sch: 1/41 Rpt: | Talarico, James (The Honorable) | 00081913 |
| 4 | Date 01/15/2025 | 5 Payee name 123test | |
| 6 | Amount (\$) \$14.99 | 7 Payee address; City; State; Zip Code Toernooiveld 300 Nijmegen 6525 EC Netherlands | |
| 8 | PURPOSE OF EXPENDITURE | | outside of Texas. Complete Schedule T. , TX, officeholder living expense g Software |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held |
| | Date | Payee name | |
| | 01/15/2025 | 123test | |
| | Amount (\$) \$14.99 | Payee address; City; State; Zip Code Toernooiveld 300 Nijmegen 6525 EC Netherlands | |
| | PURPOSE OF EXPENDITURE | | outside of Texas. Complete Schedule T. , TX, officeholder living expense g Software |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held |
| | Date | Payee name | |
| | 01/15/2025 | 123test | |
| | Amount (\$) \$14.99 | Payee address; City; State; Zip Code Toernooiveld 300 | |
| | | Nijmegen 6525 EC Netherlands | |
| | PURPOSE OF EXPENDITURE | | outside of Texas. Complete Schedule T. , TX, officeholder living expense g Software |
| | Complete ONLY if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held |
| | | | |

| | | | | EXPENDITURE | CATEGO | RIES FOR | BOX 8(a) | | | |
|---|--|-----|---------------|------------------------------|-----------------|------------------------------|-----------------|---|--|----------------------------|
| Accounting/Banking Fees Office Overhead/Recov | | | | | | pense ages/Contract Labor | | Transportation E Travel in District Travel Out of Dis | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAM | E | | | | 3 | Filer ID | (Ethics Commission Filers) |
| | Sch: 2/41 Rpt: | | Talarico, Ja | ames (The Honora | able) | | | | 00081913 | |
| 4 | Date | 5 | Payee name | 9 | | | | I | | |
| | 06/29/2025 | | ActBlue | | | | | | | |
| 6 | Amount (\$) | 7 | Payee addre | ess; City; | State; | ; Zip Co | le | | | |
| | \$2,158.20 | | 366 Summ | er Street | | | | | | |
| | | | | | | | | | | |
| | | | Somerville | , MA 02144 | | | | | | |
| 8 | PURPOSE | (a) | <u> </u> | | | | (b) Description | | | |
| ľ | OF | (, | Fees | See Categories listed at the | top of this sch | iedule) | | outs | ide of Texas. Com | plete Schedule T. |
| | EXPENDITURE | | | | | | Check if Austin | ı, TX | , officeholder living |) expense |
| | | | | | | | Donation pro | ces | ssing | |
| | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Of | ficeholder name | C | Office sou | Jht | | Office he | eld |
| | Date | | Payee name | 9 | | | | | | |
| | 06/30/2025 | | ActBlue | | | | | | | |
| | Amount (\$) | | Payee addre | ess; City; | State; | ; Zip Co | le | | | |
| | \$1,356.55 | | 366 Summ | er Street | | | | | | |
| | | | | | | | | | | |
| | | | Somerville | , MA 02144 | | | | | | |
| | PURPOSE OF | (a) | Category (S | See Categories listed at the | top of this sch | edule) | (b) Description | | | |
| | EXPENDITURE | | Fees | | | | | | ide of Texas. Com , officeholder living | |
| | | | | | | | Donation pro | | | j expense |
| | | | | | | | 2 0.1000 Pro | | Jenig | |
| | Complete ONLY if direct | | Candidate/Of | ficeholder name | (| Office sou | iht | | Office he | bld |
| | expenditure to benefit C/OF | | | | | | | | 0 | |
| _ | Date | | Payee name | | | | | | | |
| | 01/13/2025 | | Adobe | | | | | | | |
| _ | Amount (\$) | | Payee addre | ess; City; | State | ; Zip Co | 10 | | | |
| | \$64.94 | | 345 Park A | - | Slale, | , ZIP CO | Je | | | |
| | Φ04.94 | | 545 Faik F | wende | | | | | | |
| | | | San Jose, | CA 95110-2704 | | | | | | |
| | PURPOSE | (a) | Category (S | See Categories listed at the | top of this sch | edule) | (b) Description | | | |
| | OF EXPENDITURE | | Office Ove | rhead/Rental Expe | ense | | | | ide of Texas. Com | |
| | | | | | | | | ı, TX | , officeholder living |) expense |
| | | | | | | | Software | | | |
| | | Ļ | Condidate (Of | fiocholder | | Office com | ubt | | 0#i | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Januluate/Of | ficeholder name | Ĺ | Office sou | jiit | | Office he | tiu |
| | | | | | | | | | | |
| | | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | |
|---|--|-----|---|--------------|---------|--|---|---|----------------------------|--|--|
| | Advertising Expense Event Expense Loan Repayment/Reimbursement Accounting/Banking Fees Office Overhead/Rental Expense Consulting Expense Food/Beverage Expense Polling Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Printing Expense Credit Card Payment The Instruction Guide explains how to complete this form. | | | | | lead/Rental Expense nse ense ges/Contract Labor | | Travel in District Travel Out of Dis | quipment & Related Expense | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | - | 3 | Filer ID | (Ethics Commission Filers) | | |
| | Sch: 3/41 Rpt: | | Talarico, James (The Honorable) | | | | | 00081913 | | | |
| 4 | Date 02/12/2025 | 5 | Payee name Adobe | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; | State; Zi | p Cod | e | | | | | |
| | \$64.94 | | 345 Park Avenue | | | | | | | | |
| | | | San Jose, CA 95110-2704 | | | | | | | | |
| 8 | PURPOSE OF EXPENDITURE | (a) | Category (See Categories listed at the top of t Office Overhead/Rental Expense | his schedule |) (| | | de of Texas. Com , officeholder living | • | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | Office | e soug | nt | | Office he | eld | | |
| | Date | | Payee name | | | | | | | | |
| | 03/12/2025 | | Adobe | | | | | | | | |
| | Amount (\$) | | Payee address; City; | State; Zi | p Cod | e | | | | | |
| | \$64.94 | | 345 Park Avenue San Jose, CA 95110-2704 | | | | | | | | |
| | PURPOSE OF EXPENDITURE | (a) | Category (See Categories listed at the top of t Office Overhead/Rental Expense | his schedule |) (1 | | | de of Texas. Com , officeholder living | | | |
| | Complete ONLY if direct expenditure to benefit C/OF | | Candidate/Officeholder name | Office | e sougl | nt | | Office he | eld | | |
| | Date | | Payee name | | | | | | | | |
| | 04/14/2025 | | Adobe | | | | | | | | |
| | Amount (\$) | | Payee address; City; | State; Zi | p Cod | е | | | | | |
| | \$64.94 | | 345 Park Avenue | | | | | | | | |
| | | | San Jose, CA 95110-2704 | | | | | | | | |
| | PURPOSE OF EXPENDITURE | (a) | Category (See Categories listed at the top of t Office Overhead/Rental Expense | his schedule |) (| | | de of Texas. Com , officeholder livinç | • | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | Office | e sougl | nt | | Office he | eld | | |
| | | | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | | |
|---|--|---|--------------------------------|--|-------|------------|-----|---|------------------------|---|--------------------------------|-----------|
| | Advertising Expense Event Expense Loan Repayment/Reimbursement Accounting/Banking Fees Office Overhead/Rental Expense Consulting Expense Food/Beverage Expense Polling Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Printing Expense Credit Card Payment The Instruction Guide explains how to complete this form. | | | | | | | Travel in District Travel Out of Dis | quipment & Related Exp | | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | | | 3 | Filer ID | (Ethics Commission | n Filers) |
| | Sch: 4/41 Rpt: | | | es (The Honor | able) | | | | | 00081913 | | |
| 4 | Date 05/12/2025 | | Payee name Adobe | | | | | | | | | |
| 6 | Amount (\$) \$64.94 | 7 | Payee address 345 Park Ave | | State | ; Zip Co | de | | | | | |
| | | | San Jose, CA | 95110-2704 | | | | | | | | |
| 8 | PURPOSE OF EXPENDITURE | | | Categories listed at th ad/Rental Exp | | iedule) | | 1 | | le of Texas. Com officeholder living | plete Schedule T. I expense | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Office | holder name | (| Office sou | ght | | | Office he | eld | |
| | Date | | Payee name | | | | | | | | | |
| | 06/12/2025 | | Adobe | | | | | | | | | |
| | Amount (\$) \$64.94 | | Payee address 345 Park Ave | | State | ; Zip Co | de | | | | | |
| | | | San Jose, CA | 95110-2704 | | | | | | | | |
| | PURPOSE OF EXPENDITURE | | | Categories listed at th ad/Rental Exp | | edule) | | 1 | | le of Texas. Com officeholder living | plete Schedule T. I expense | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Office | holder name | C | Dffice sou | ght | | | Office he | eld | |
| | Date 01/16/2025 | | Payee name Amazon | | | | | | | | | |
| | Amount (\$) \$27.05 | | Payee address 410 Terry Ave | | State | ; Zip Co | de | | | | | |
| | | | Seattle, WA 9 | 8109 | | | | | | | | |
| | PURPOSE OF EXPENDITURE | | | Categories listed at th ad/Rental Exp | | edule) | | | TX, | de of Texas. Com officeholder living | plete Schedule T. I expense | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Office | holder name | (| Dffice sou | ght | | | Office he | eld | |
| | | | | | | | | | | | | |

| | | | EXPENDITURE CATE | GORIES FO | DR B | OX 8(a) | | |
|---|---|---|--|---------------|-------|---------------|-------|---|
| | | Accounting/Banking Fees Office Overhead/Rental Expense Consulting Expense Food/Beverage Expense Polling Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Gitt/Awards/Memorials Expense Printing Expense Candidate/Officeholder/Political Committee Legal Services 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) |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission Filers) |
| | Sch: 5/41 Rpt: | | Talarico, James (The Honorable) | | | | | 00081913 |
| 4 | Date | 5 | Payee name | | | | | |
| | 01/21/2025 | | Amazon | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; S | State; Zip C | code | | | |
| | \$298.74 | | 410 Terry Ave N | | | | | |
| | | | | | | | | |
| | | | Seattle, WA 98109 | | | | | |
| 8 | PURPOSE | (a) | Category (See Categories listed at the top of th | is schodulo) | (b) |) Description | | |
| | OF | ľ | Office Overhead/Rental Expense | iis schedule) | | | outsi | ide of Texas. Complete Schedule T. |
| | EXPENDITURE | | | | | | | , officeholder living expense |
| | | | | | | Office Suppli | es | |
| | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | Office so | ought | t | | Office held |
| | Date | | Payee name | | | | | |
| | 02/12/2025 | | Amazon | | | | | |
| | Amount (\$) | | Payee address; City; S | State; Zip C | code | | | |
| | \$57.64 | | 410 Terry Ave N | | | | | |
| | | | | | | | | |
| | | | Seattle, WA 98109 | | | | | |
| | PURPOSE | (a) | Category (See Categories listed at the top of th | iis schedule) | (b) | Description | | |
| | OF EXPENDITURE | | Office Overhead/Rental Expense | | | | | ide of Texas. Complete Schedule T. |
| | | | | | | Office Suppli | | , officeholder living expense |
| | | | | | | Once Suppli | 63 | |
| | Complete ONIL V if direct | | Condidate (Office holder name | Office of | | • | | Office held |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | Office so | ugni | L | | Office held |
| | | _ | | | | | | |
| | Date | | Payee name | | | | | |
| | 02/14/2025 | | Amazon | | | | | |
| | Amount (\$) | | Payee address; City; S | State; Zip C | code | | | |
| | \$94.54 | | 410 Terry Ave N | | | | | |
| | | | | | | | | |
| | | | Seattle, WA 98109 | | | | | |
| | PURPOSE | (a) | Category (See Categories listed at the top of th | iis schedule) | (b) |) Description | | |
| | OF EXPENDITURE | | Office Overhead/Rental Expense | , | | | | ide of Texas. Complete Schedule T. |
| | EXPENDITORE | | | | | | | , officeholder living expense |
| | | | | | | Office Suppli | es | |
| | | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | Office so | ought | t | | Office held |
| | experiatione to benefit C/Of | | | | | | | |
| | | | | | | | | |
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| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | |
|---|---|--|-------------|--|--|--|--|--|--|--|--|
| | | Accounting/Banking Fees Office Overhead/Rental Expense Consulting Expense Food/Beverage Expense Polling Expense Contributions/ Donations Made By- Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Printing Expense Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor | | | | | | | | | |
| 1 | Total pages Schedule F1: | LER NAME | 3 Fi | iler ID (Ethics Commission Filers) | | | | | | | |
| | Sch: 6/41 Rpt: | alarico, James (The Honorable) | 0 | 0081913 | | | | | | | |
| 4 | Date 03/03/2025 | ayee name mazon | | | | | | | | | |
| 6 | Amount (\$) \$21.57 | ayee address; City; State; Zip Co L0 Terry Ave N | е | | | | | | | | |
| | | eattle, WA 98109 | | | | | | | | | |
| 8 | PURPOSE OF EXPENDITURE | ategory (See Categories listed at the top of this schedule) ffice Overhead/Rental Expense | | of Texas. Complete Schedule T. ïceholder living expense | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | ndidate/Officeholder name Office sou | ht | Office held | | | | | | | |
| | Date | ayee name | | | | | | | | | |
| | 03/06/2025 | mazon | | | | | | | | | |
| | Amount (\$) \$88.41 | ayee address; City; State; Zip Cod L0 Terry Ave N eattle, WA 98109 | e | | | | | | | | |
| | PURPOSE OF EXPENDITURE | | | of Texas. Complete Schedule T. iceholder living expense | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | ndidate/Officeholder name Office sou | ht | Office held | | | | | | | |
| | Date | ayee name | | | | | | | | | |
| | 03/18/2025 | mazon | | | | | | | | | |
| | Amount (\$) \$10.81 | ayee address; City; State; Zip Con L0 Terry Ave N | e | | | | | | | | |
| | | eattle, WA 98109 | | | | | | | | | |
| | PURPOSE OF EXPENDITURE | ategory (See Categories listed at the top of this schedule) ffice Overhead/Rental Expense | | of Texas. Complete Schedule T. iceholder living expense | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | ndidate/Officeholder name Office sou | ht | Office held | | | | | | | |
| | | | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | |
|---|--|---|---|----------------|---------------|------|--|-------|---|----------------------------|--|
| | | Accounting/Banking Fees Office Overhead/Rental Expense Consulting Expense Food/Beverage Expense Polling Expense Candidate/Officeholder/Political Committee Eqal Services Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form. | | | | | d/Rental Expense e /Contract Labor | | Travel in District Travel Out of Dis | quipment & Related Expense | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | | 3 | Filer ID | (Ethics Commission Filers) | |
| | Sch: 7/41 Rpt: | | Talarico, James (| The Honorable) | | | | | 00081913 | | |
| 4 | Date 03/21/2025 | | Payee name Amazon | | | | | | | | |
| 6 | Amount (\$) \$123.20 | | Payee address; 410 Terry Ave N Seattle, WA 9810 | | State; Zip C | ode | | | | | |
| 8 | PURPOSE OF EXPENDITURE | | Category _{(See Categ} Office Overhead/ | | his schedule) | (b) | | , TX, | de of Texas. Com officeholder living | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | andidate/Officehold | er name | Office sou | ught | | | Office he | ld | |
| | Date | | Payee name | | | | | | | | |
| | 04/14/2025 | | Amazon | | | | | | | | |
| | Amount (\$) \$340.83 | | Payee address; 410 Terry Ave N Seattle, WA 9810 | | State; Zip C | ode | | | | | |
| | PURPOSE OF EXPENDITURE | (a) | Category _{(See Categ} Office Overhead/ | | his schedule) | (b) | | , TX, | de of Texas. Com officeholder living | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | andidate/Officehold | er name | Office sou | ught | | | Office he | ld | |
| | Date | | Payee name | | | | | | | | |
| | 01/16/2025 | | Asana | | | | | | | | |
| | Amount (\$) \$217.63 | | Payee address; 633 Folsom Stree Suite 100 San Francisco, C | et | State; Zip Co | ode | | | | | |
| | PURPOSE OF EXPENDITURE | (a) | Category _{(See Categ} Office Overhead/ | | his schedule) | (b) | | , TX, | de of Texas. Com officeholder living iption | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | andidate/Officehold | er name | Office sou | ught | | | Office he | eld | |
| | | | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | |
|---|--|---|--|------------|-----|------------------|-------|---|--|--|--|
| | Advertising Expense Event Expense Loan Repayment/Reimbursement Accounting/Banking Fees Office Overhead/Rental Expense Consulting Expense Food/Beverage Expense Polling Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Printing Expense Credit Card Payment The Instruction Guide explains how to complete this form. | | | | | | | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission Filers) | | | |
| | Sch: 8/41 Rpt: | | Talarico, James (The Honorable) | | | | | 00081913 | | | |
| 4 | Date | 5 | Payee name | | | | | | | | |
| | 05/09/2025 | | Asana | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; State | ; Zip Co | de | | | | | | |
| | \$1,405.84 | | 633 Folsom Street | | | | | | | | |
| | | | Suite 100 | | | | | | | | |
| | | | San Francisco, CA 94107 | | | | | | | | |
| 8 | PURPOSE | | | | (h) | Description | | | | | |
| Ũ | OF | | Category (See Categories listed at the top of this sch Office Overhead/Rental Expense | nedule) | () | | outsi | de of Texas. Complete Schedule T. | | | |
| | EXPENDITURE | | | | | Check if Austin, | , TX, | officeholder living expense | | | |
| | | | | | | Software Sub | scr | ription | | | |
| | | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | andidate/Officeholder name | Office sou | ght | | | Office held | | | |
| | Date | | Payee name | | | | | | | | |
| | 04/02/2025 | | Austin Flower Delivery | | | | | | | | |
| | Amount (\$) | | Payee address; City; State | ; Zip Co | de | | | | | | |
| | \$230.26 | | 105 W 8th St #1c | | | | | | | | |
| | | | Austin, TX 78701 | | | | | | | | |
| | PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this sch Office Overhead/Rental Expense | nedule) | | Check if Austin, | | de of Texas. Complete Schedule T. officeholder living expense | | | |
| | | | | | | Gift | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | andidate/Officeholder name | Office sou | ght | | | Office held | | | |
| | Date | | Payee name | | | | | | | | |
| | 02/27/2025 | | Avanti Markets Capitol Annex | | | | | | | | |
| | Amount (\$) | | Payee address; City; State | ; Zip Co | de | | | | | | |
| | \$10.48 | | 1100 Congress Ave | | | | | | | | |
| | | | Austin, TX 78701 | | | | | | | | |
| | PURPOSE OF | | Category (See Categories listed at the top of this sch | nedule) | (b) | Description | outo: | de of Toylog, Complete Selectula T | | | |
| | EXPENDITURE | | Office Overhead/Rental Expense | | | | , тх, | de of Texas. Complete Schedule T. officeholder living expense | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | andidate/Officeholder name | Office sou | ght | | | Office held | | | |
| | | | | | | | | | | | |

| | | | EXPENDITURE CATEG | ORIES FO | R B | OX 8(a) | | |
|---|--|-----|--|-------------|-----------|-----------------|-------|---|
| | Advertising Expense Event Expense Loan Repayment/Reimbursement Accounting/Banking Fees Office Overhead/Rental Expense Consulting Expense Food/Beverage Expense Polling Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Printing Expense Credit Card Payment The Instruction Guide explains how to complete this form. | | | | | | | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission Filers) |
| | Sch: 9/41 Rpt: | | Talarico, James (The Honorable) | | | | | 00081913 |
| 4 | Date | 5 | Payee name | | | | | |
| | 01/21/2025 | | Bhalla, Rachel | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; Sta | ate; Zip Co | ode | | | |
| | \$300.00 | | 55 Hicks St #3 | | | | | |
| | | | | | | | | |
| | | | Brooklyn, NY 11201 | | | | | |
| 8 | PURPOSE | (a) | Category (See Categories listed at the top of this | aabadula) | (b) | Description | | |
| - | OF | | Salaries/Wages/Contract Labor | schedule) | | | outsi | ide of Texas. Complete Schedule T. |
| | EXPENDITURE | | | | | Check if Austin | , TX, | , officeholder living expense |
| | | | | | | Consulting | | |
| | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | Office sou | ught | | | Office held |
| | Date | | Payee name | | | | | |
| | 02/07/2025 | | Capitol Visitors Parking Garage | | | | | |
| | Amount (\$) | | Payee address; City; Sta | ate; Zip Co | ode | | | |
| | \$12.00 | | 1201 San Jacinto Blvd | | | | | |
| | | | Austin, TX 78701 | | | | | |
| _ | PURPOSE | (a) | Category (See Categories listed at the top of this | | (b) | Description | | |
| | OF | | Office Overhead/Rental Expense | schedule) | (~) | | outsi | ide of Texas. Complete Schedule T. |
| | EXPENDITURE | | | | | | , TX, | , officeholder living expense |
| | | | | | | Parking | | |
| | | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | Office sou | ught | | | Office held |
| | Date | | Payee name | | | | | |
| | 02/12/2025 | | Chick Fil A | | | | | |
| | Amount (\$) | | Payee address; City; Sta | ate; Zip Co | ode | | | |
| | \$39.67 | | 5200 Buffington Road | | | | | |
| | | | 5 | | | | | |
| | | | Atlanta, GA 30349 | | - | | | |
| | PURPOSE OF | (a) | Category (See Categories listed at the top of this | schedule) | (b) | Description | outoi | ide of Toylog, Complete Schodule T |
| | EXPENDITURE | | Food/Beverage Expense | | | | | ide of Texas. Complete Schedule T. , officeholder living expense |
| | | | | | 1 | Staff Food | , 17, | |
| | | | | | 1 | | | |
| - | Complete ONLY if direct | L(| Candidate/Officeholder name | Office sou | L Jaht | | | Office held |
| | expenditure to benefit C/OF | | | 2 | 5 | | | |
| - | | | | | | | | |
| | | | | | | | | |

| | | | EXPENDITURE CA | ATEGORIE | ES FOR | BOX 8(a) | | |
|---|---|-----|--|----------------|---|--------------------------------|--------|---|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exper nmittee Legal Services The Instruction Guide e | rse F S | Office Overl Polling Expe Printing Exp Salaries/Wa | ense ges/Contract Labor | | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) |
| 1 | Total pages Schedule F1: | 2 | FILER NAME 3 F | | | | | Filer ID (Ethics Commission Filers) |
| | Sch: 10/41 Rpt: | | Talarico, James (The Honorable | e) | | | | 00081913 |
| 4 | Date | 5 | Payee name | | | | • | |
| | 04/07/2025 | | Chili's | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; | State; | Zip Cod | e | | |
| | \$131.09 | | 4420 N Lamar Blvd | | | | | |
| | | | | | | | | |
| | | | Austin, TX 78756 | | | | | |
| 8 | PURPOSE | (a) | Category (See Categories listed at the top | of this schedu | ule) (| b) Description | | |
| | OF EXPENDITURE | | Food/Beverage Expense | | | | | side of Texas. Complete Schedule T. |
| | | | | | | Food | ι, TΧ, | c, officeholder living expense |
| | | | | | | Food | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/O | | Candidate/Officeholder name | Off | ice soug | ht | | Office held |
| | Date | | Payee name | | | | | |
| | 04/08/2025 | | Clayton Spangler Photographic | Design | | | | |
| | Amount (\$) | | Payee address; City; | State; | Zip Cod | e | | |
| | \$429.00 | | 235 Point Lick Drive | | | | | |
| | | | Charleston, WV 25306 | | | | | |
| | PURPOSE OF EXPENDITURE | (a) | Category (See Categories listed at the top Advertising Expense | of this schedu | ule) (| | n, TX | side of Texas. Complete Schedule T. K, officeholder living expense |
| | Complete ONLY if direct | | Candidate/Officeholder name | Off | ice soug | ht | | Office held |
| | expenditure to benefit C/OI | | | 0 | lee eeug | | | 0 |
| | Date | | Payee name | | | | | |
| | 06/03/2025 | | Cornucopia Popcorn | | | | | |
| | Amount (\$) | | Payee address; City; | State: | Zip Cod | e | | |
| | \$53.04 | | 7318 McNeil Dr #111 | , | P | | | |
| | | | | | | | | |
| | | | Austin, TX 78729 | | | | | |
| | PURPOSE OF | (a) | Category (See Categories listed at the top | | ule) (| b) Description Check if travel | outsi | side of Texas. Complete Schedule T. |
| | EXPENDITURE | | Office Overhead/Rental Expens | se | | | | c, officeholder living expense |
| | | | | | | Gift | | |
| | | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | H | Candidate/Officeholder name | Off | ice soug | ht | | Office held |
| | | | | | | | | |
| | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | | |
|---|---|-----|---|---|-------------------|---|-------------------------------------|----------------------|-------|---|--|-------|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | F F G mmittee L | vent Expense ces ood/Beverage Expense ift/Awards/Memorials E egal Services he Instruction Gui | Expense | Office Ove Polling Exp Printing Exp Salaries/W | erhead pense (pense /ages/ | e /Contract Labor | | Transportation E Travel in District Travel Out of Dis | Iraising Expense iquipment & Related Expens strict category not listed above) | e |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | | | 3 | Filer ID | (Ethics Commission Fi | lers) |
| | Sch: 11/41 Rpt: | | Talarico, James (The Honorable)00081913 | | | | | | | | | |
| 4 | Date | 5 | Payee name | | | | | | | | | |
| | 06/04/2025 | | Dollar Tree | | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee address | ; City; | State | ; Zip Co | de | | | | | |
| | \$1.35 | | 5425 N IH 35 | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | Austin, TX 78 | 723 | | | | | | | | |
| 8 | PURPOSE | (a) | Category (Soo | Categories listed at the | a top of this sol | odulo) | (b) | Description | | | | |
| - | OF | | | ead/Rental Exp | | ledule) | () | | outsi | de of Texas. Com | plete Schedule T. | |
| | EXPENDITURE | | 0 | | 01100 | | | Check if Austin | , TX, | officeholder living |) expense | |
| | | | | | | | | Office supplie | es | | | |
| | | | | | | | | | | | | |
| 9 | Complete ONLY if direct | | Candidate/Office | holder name | (| Office sou | ght | | | Office h | eld | |
| | expenditure to benefit C/OI | - | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | | |
| | 03/12/2025 | | Domino's | | | | | | | | | |
| | Amount (\$) | | Payee address | ; City; | State | ; Zip Co | de | | | | | |
| | \$290.04 | | 1400 Brazos | | | · • | | | | | | |
| | +=00101 | | 2.00 2.0200 | | | | | | | | | |
| | | | Austin, TX 78 | 701 | | | | | | | | |
| | PURPOSE | (a) | Category (See | Categories listed at the | e top of this sch | nedule) | (b) | Description | | | | |
| | OF EXPENDITURE | | Food/Bevera | ge Expense | | | | | | | plete Schedule T. | |
| | | | | | | | | | , IX, | officeholder living | j expense | |
| | | | | | | | | Food | | | | |
| | Complete ONLY if direct | | Candidate/Office | boldor namo | | Office sou | abt | | | Office h | ad | |
| | expenditure to benefit C/OI | | | noluel name | (| Since Sou | yn | | | Onice In | eiu | |
| _ | Data | _ | | | | | | | | | | |
| | Date 05/27/2025 | | Payee name Domino's | | | | | | | | | |
| | | | | 0.1 | | 7. 0 | | | | | | |
| | Amount (\$) | | Payee address | | State | ; Zip Co | de | | | | | |
| | \$72.06 | | 30 Frank Lioy | d Wright Drive | | | | | | | | |
| | | | | | | | | | | | | |
| | | | Ann Arbor, M | 1 48106 | | | | | | | | |
| | PURPOSE OF | (a) | | Categories listed at the | e top of this sch | nedule) | (b) | Description | | de a(Ta) - 0 | | |
| | EXPENDITURE | | Food/Bevera | ge Expense | | | | | | de of Texas. Com officeholder living | plete Schedule T. | |
| | | | | | | | | Food | , 17, | | l expense | |
| | | | | | | | | | | | | |
| - | Complete ONLY if direct | Ľ | Candidate/Office | holder name | (| Office sou | aht | | | Office h | eld | |
| | expenditure to benefit C/Oł | | | | | | J | | | 0 | | |
| - | | | | | | | | | | | | |
| | | | | | | | | | | | | |

| | | | EXPENDITURE CATEGO | RIES FOF | вох | 8(a) | | | | | | |
|---|---|-----|--|------------|---------------|------------------|-----|---|--|--|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | | | | | | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | | | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission Filers) | | | | |
| | Sch: 12/41 Rpt: | | Talarico, James (The Honorable)00081913 | | | | | | | | | |
| 4 | Date | 5 | Payee name | | | | | | | | | |
| | 06/24/2025 | | Doordash | | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; State | ; Zip Co | de | | | | | | | |
| | \$132.14 | | 303 2nd Street Suite 800 | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | San Francisco, CA 94107 | | | | | | | | | |
| 8 | PURPOSE | (a) | Category (See Categories listed at the top of this sch | nedule) | (b) De | escription | | | | | | |
| | OF EXPENDITURE | | Food/Beverage Expense | | | 4 | | de of Texas. Complete Schedule T. | | | | |
| | | | | | | Check if Austin, | ΤX, | officeholder living expense | | | | |
| | | | | | Γ | 000 | | | | | | |
| 9 | Complete ONLY if direct | | Candidate/Officeholder name | Office sou | nht | | | Office held | | | | |
| 5 | expenditure to benefit C/OF | | | | JIIC | | | | | | | |
| | Date | | Payee name | | | | | | | | | |
| | 02/18/2025 | | Dropbox | | | | | | | | | |
| | Amount (\$) | | Payee address; City; State | ; Zip Co | de | | | | | | | |
| | \$212.13 | | 1800 Owens St | • | | | | | | | | |
| | | | | | | | | | | | | |
| | | | San Francisco, CA 94158 | | | | | | | | | |
| | PURPOSE | (a) | Category (See Categories listed at the top of this sch | nedule) | (b) De | escription | | | | | | |
| | OF EXPENDITURE | | Office Overhead/Rental Expense | | | 4 | | de of Texas. Complete Schedule T. | | | | |
| | | | | | L | 4 | | officeholder living expense | | | | |
| | | | | | 0 | nline Storag | je | | | | | |
| | Complete ONLY if direct | | Candidate/Officeholder name | Office sou | nht | | | Office held | | | | |
| | expenditure to benefit C/OI | | | | JIIL | | | Once heid | | | | |
| | Data | - | D | | | | | | | | | |
| | Date 02/03/2025 | | Payee name Esparza, Antonio | | | | | | | | | |
| | | | | 7. 0 | | | | | | | | |
| | Amount (\$) | | | ; Zip Co | de | | | | | | | |
| | \$200.00 | | 14912 Alpha Collier Dr | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | Austin, TX 78728 | | | | | | | | | |
| | PURPOSE OF | (a) | Category (See Categories listed at the top of this sch | nedule) | (b) De | escription | | | | | | |
| | EXPENDITURE | | Salaries/Wages/Contract Labor | | | 4 | | de of Texas. Complete Schedule T. officeholder living expense | | | | |
| | | | | | L Pa | ayroll | 17, | uncerolder iving expense | | | | |
| | | | | | | , | | | | | | |
| - | Complete ONLY if direct | L(| Candidate/Officeholder name | Office sou | aht | | | Office held | | | | |
| | expenditure to benefit C/OI | | | | • | | | | | | | |
| - | | | | | | | | | | | | |
| | | | | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | |
|---|---|---|-------------------------------|--|--|--------|---|----------------------------|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | Event Expense Fees Food/Beverage Gift/Awards/M Committee Legal Services | e Expense emorials Expense | Loan Repayn Office Overhe Polling Exper Printing Expe Salaries/Wag | nent/Reimbursement ad/Rental Expense ise nse es/Contract Labor | | Travel in District Travel Out of Dis | quipment & Related Expense | | |
| 1 | Total pages Schedule F1: | P FILER NAME 3 Filer ID (Ethics Commission | | | | | | | | |
| | Sch: 13/41 Rpt: | Talarico, James (The | Honorable) | | | | 00081913 | | | |
| 4 | Date | Payee name | | | | 1 | | | | |
| | 03/10/2025 | Esparza, Antonio | | | | | | | | |
| 6 | Amount (\$) | ' Payee address; City | ; State; | Zip Code | ! | | | | | |
| | \$200.00 | 14912 Alpha Collier D | r | | | | | | | |
| | | | | | | | | | | |
| | | Austin, TX 78728 | | | | | | | | |
| 8 | PURPOSE | a) Category (See Categories li | ated at the ten of this cab | odulo) (b |) Description | | | | | |
| - | OF | Salaries/Wages/Contr | | euule) | | outsid | de of Texas. Com | plete Schedule T. | | |
| | EXPENDITURE | | | | Check if Austin | n, TX, | officeholder living | expense | | |
| | | | | | Payroll | | | | | |
| | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder na | me C | Office sough | t | | Office he | eld | | |
| | Date | Payee name | | | | | | | | |
| | 04/01/2025 | Esparza, Antonio | | | | | | | | |
| | Amount (\$) | Payee address; City | ; State; | Zip Code | ! | | | | | |
| | \$200.00 | 14912 Alpha Collier D | r | | | | | | | |
| | | | | | | | | | | |
| | | Austin, TX 78728 | | | | | | | | |
| | PURPOSE | a) Category (See Categories li | sted at the top of this sch | edule) (b |) Description | | | | | |
| | OF EXPENDITURE | Salaries/Wages/Contr | | , | | | de of Texas. Com | • | | |
| | | | | | | n, TX, | officeholder living | expense | | |
| | | | | | Payroll | | | | | |
| | Complete ONLY if direct | Candidate/Officeholder na | | Office sough | + | | Office he | bld | | |
| | expenditure to benefit C/OF | | ine C | Since Sough | L | | Once ne | tiu | | |
| | Data | | | | | | | | | |
| | Date 05/01/2025 | Payee name Esparza, Antonio | | | | | | | | |
| | | • | | | | | | | | |
| | Amount (\$) | Payee address; City | | Zip Code | | | | | | |
| | \$200.00 | 14912 Alpha Collier D | ſ | | | | | | | |
| | | Austin, TX 78728 | | | | | | | | |
| | PURPOSE | a) Category (See Categories li | tod at the tap of this - 1 | odulo) (h |) Description | | | | | |
| | OF | Salaries/Wages/Contr | | | | outsid | de of Texas. Com | plete Schedule T. | | |
| | EXPENDITURE | Calcance, Magee, Com | | | Check if Austin | n, TX, | officeholder living | expense | | |
| | | | | | Payroll | | | | | |
| | | | | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder na | me C | Office sough | t | | Office he | eld | | |
| | openditare to benefit C/Of | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | nmittee | Event Expense Fees Food/Beverage E Gift/Awards/Mem Legal Services | | Loan Repa Office Ove Polling Exp Printing Ex Salaries/W | yment/Rei head/Ren ense pense ages/Cont | mbursement tal Expense ract Labor | | Transportation E Travel in District Travel Out of Dis | |
|---|---|-----|---------------|---|--------------------------|---|---|---|-------|---|----------------------------|
| 1 | Total pages Schedule F1: | 2 | FILER NAM | = | | | | | 3 | Filer ID | (Ethics Commission Filers) |
| - | Sch: 14/41 Rpt: | ſ | | – ames (The H | onorable) | | | | 5 | 00081913 | |
| 4 | Date | 5 | Payee name | | | | | | | | |
| | 05/30/2025 | | Esparza, A | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee addre | ess; City; | State; | Zip Co | le | | | | |
| | \$200.00 | | 14912 Alph | a Collier Dr | | | | | | | |
| | | | Austin, TX | 78728 | | | | | | | |
| 8 | PURPOSE | (a) | Category (| | | | (h) Dog | cription | | | |
| ľ | OF | ``' | | iee Categories liste ages/Contra | d at the top of this sch | edule) | _ | • | outsi | de of Texas. Com | nplete Schedule T. |
| | EXPENDITURE | | Salaries/W | ayes/Contrac | | | | | | officeholder living | • |
| | | | | | | | | /roll | | | |
| | | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/O | | Candidate/Off | iceholder nam | e C | Dffice sou | Jht | | | Office h | eld |
| | Date | | Payee name | | | | | | | | |
| | 06/05/2025 | | Go Daddy | | | | | | | | |
| | Amount (\$) | - | Payee addre | ess; City; | State | Zip Co | h۵ | | | | |
| | ., | | | - | State, | | | | | | |
| | \$30.34 | | 2155 E G0 | Daddy Way | | | | | | | |
| | | | Tempe, AZ | 85284 | | | | | | | |
| | PURPOSE | (a) | Category (S | ee Categories liste | d at the top of this sch | edule) | (b) Des | scription | | | |
| | OF EXPENDITURE | | Office Over | head/Rental | Expense | | | | | | nplete Schedule T. |
| | | | | | | | | | , тх, | officeholder living | g expense |
| | | | | | | | We | bsite | | | |
| | | | | | | | | | | | |
| | Complete ONLY if direct | | Candidate/Off | iceholder nam | e C | Office sou | jht | | | Office he | eld |
| | expenditure to benefit C/OI | H | | | | | | | | | |
| | Date | | Payee name | | | | | | | | |
| | 01/02/2025 | | Google | | | | | | | | |
| | Amount (\$) | | Payee addre | ess; City; | Stato | Zip Co | 10 | | | | |
| | | | | | | | le | | | | |
| | \$138.15 | | 1600 Ampr | hitheatre Pkw | 'Y | | | | | | |
| | | | | | | | | | | | |
| | | | Mountain V | 'iew, CA 940 | 43-1351 | | | | | | |
| | PURPOSE | (a) | Category (S | ee Categories liste | d at the top of this sch | edule) | (b) Des | scription | | | |
| | OF EXPENDITURE | | Office Over | head/Rental | Expense | | | | | | nplete Schedule T. |
| | EXIENDITORE | | | | | | | | | officeholder living | g expense |
| | | | | | | | Gsi | uite Accou | ints | 5 | |
| | | | | | | | | | | | |
| | Complete ONLY if direct | | Candidate/Off | iceholder nam | e C | Office sou | ht | | | Office h | eld |
| | expenditure to benefit C/OI | Н | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | |
|---|---|---|---|--|--|--|--|--|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | | | | | | | |
| 1 | Total pages Schedule F1: | FILER NAME | 3 Filer ID (Ethics Commission Filers) | | | | | | | |
| | Sch: 15/41 Rpt: | Talarico, James (The Honorable)00081913 | | | | | | | | |
| 4 | Date 01/02/2025 | Payee name Google | | | | | | | | |
| 6 | Amount (\$) \$12.87 | Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351 | | | | | | | | |
| 8 | 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense Google storage | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held | | | | | | | |
| | Date | Payee name | | | | | | | | |
| | 02/03/2025 | Google | | | | | | | | |
| | Amount (\$) \$153.98 | Payee address;City;State;Zip Code1600 Amphitheatre PkwyMountain View, CA 94043-1351 | | | | | | | | |
| | PURPOSE OF EXPENDITURE | | outside of Texas. Complete Schedule T. TX, officeholder living expense nts | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held | | | | | | | |
| | Date 02/03/2025 | Payee name Google | | | | | | | | |
| | Amount (\$) \$12.96 | Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy | | | | | | | | |
| | | Mountain View, CA 94043-1351 | | | | | | | | |
| | PURPOSE OF EXPENDITURE | | outside of Texas. Complete Schedule T. TX, officeholder living expense J C | | | | | | | |
| | Complete ONLY if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held | | | | | | | |
| | | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | |
|---|---|--|---------------------------------------|-------------------|-------------|-----------------|---|----------------------------|----------------------------|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | Fees Office Overhead/Rental Expense T Food/Beverage Expense Polling Expense T y - Gift/Awards/Memorials Expense Printing Expense T | | | | | Travel in District Travel Out of Dis | quipment & Related Expense | | | |
| 1 | Total pages Schedule F1: | 2 FI | LER NAME | | | | 3 | Filer ID | (Ethics Commission Filers) | | |
| | Sch: 16/41 Rpt: | Т | alarico, James (The Honor | able) | | | | 00081913 | | | |
| 4 | Date | 5 Pa | Payee name | | | | | | | | |
| | 03/03/2025 | G | oogle | | | | | | | | |
| 6 | Amount (\$) | 7 P | ayee address; City; | State; | ; Zip Coo | le | | | | | |
| | \$168.85 | 1 | 600 Amphitheatre Pkwy | | | | | | | | |
| | | | | | | | | | | | |
| | | Μ | ountain View, CA 94043-1 | 351 | | | | | | | |
| 8 | PURPOSE | (a) C | ategory (See Categories listed at the | e ton of this sch | edule) | (b) Description | | | | | |
| | OF EXPENDITURE | | ffice Overhead/Rental Exp | | iouulo) | | outsi | de of Texas. Com | plete Schedule T. | | |
| | EXPENDITORE | | | | | | | officeholder living | expense | | |
| | | | | | | Gsuite accou | Ints | | | | |
| _ | | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | ndidate/Officeholder name | C | Office sou | ht | | Office he | ald | | |
| | Date | P | ayee name | | | | | | | | |
| | 03/03/2025 | G | oogle | | | | | | | | |
| | Amount (\$) | Pa | ayee address; City; | State; | ; Zip Coo | le | | | | | |
| | \$12.96 | 1 | 600 Amphitheatre Pkwy | | | | | | | | |
| | | M | ountain View, CA 94043-1 | 351 | | | | | | | |
| | PURPOSE | (a) C | ategory (See Categories listed at the | e top of this sch | (aluba | (b) Description | | | | | |
| | OF EXPENDITURE | | ffice Overhead/Rental Exp | | icuaic) | | outsi | de of Texas. Com | plete Schedule T. | | |
| | EXPENDITORE | | | | | | | officeholder living | expense | | |
| | | | | | | Google stora | ge | | | | |
| | | | | | | | | 011 | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | ndidate/Officeholder name | Ĺ | Office soug | Int | | Office he | 910 | | |
| | · | | | | | | | | | | |
| | Date | | ayee name | | | | | | | | |
| | 04/01/2025 | | oogle | | | | | | | | |
| | Amount (\$) | | ayee address; City; | State; | ; Zip Coo | le | | | | | |
| | \$12.96 | 10 | 600 Amphitheatre Pkwy | | | | | | | | |
| | | M | ountain View, CA 94043-1 | 351 | | | | | | | |
| - | PURPOSE | | ategory (See Categories listed at the | | edule) | (b) Description | | | | | |
| | OF | | ffice Overhead/Rental Exp | | iouuroj | | outsi | de of Texas. Com | plete Schedule T. | | |
| | EXPENDITURE | | ···· | | | | | officeholder living | expense | | |
| | | | | | | Google stora | ge | | | | |
| | | | | | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | ndidate/Officeholder name | C | Office soug | ht | | Office he | eld | | |
| | | • | | | | | | | | | |
| | | | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | |
|---|---|---|---|--|--|--|--|--|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | | | | | | | |
| 1 | Total pages Schedule F1: | FILER NAME | 3 Filer ID (Ethics Commission Filers) | | | | | | | |
| | Sch: 17/41 Rpt: | Talarico, James (The Honorable)00081913 | | | | | | | | |
| 4 | Date 04/01/2025 | Payee name Google | | | | | | | | |
| 6 | Amount (\$) \$173.38 | Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351 | | | | | | | | |
| 8 | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held | | | | | | | |
| | Date | Payee name | | | | | | | | |
| | 05/01/2025 | Google | | | | | | | | |
| | Amount (\$) \$197.00 | Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351 | | | | | | | | |
| | PURPOSE OF EXPENDITURE | | outside of Texas. Complete Schedule T. TX, officeholder living expense nts | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held | | | | | | | |
| | Date 05/02/2025 | Payee name Google | | | | | | | | |
| | Amount (\$) \$12.96 | Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy | | | | | | | | |
| | | Mountain View, CA 94043-1351 | | | | | | | | |
| | PURPOSE OF EXPENDITURE | | outside of Texas. Complete Schedule T. TX, officeholder living expense G C | | | | | | | |
| | Complete ONLY if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held | | | | | | | |
| | | | | | | | | | | |

| | | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | |
|---|---|---|---|--|--|--|--|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | | | | | | |
| 1 | Total pages Schedule F1: | | 3 Filer ID (Ethics Commission Filers) | | | | | | |
| 1 | Sch: 18/41 Rpt: | Talarico, James (The Honorable) | 00081913 | | | | | | |
| 4 | Date 06/02/2025 | Payee name Google | | | | | | | |
| 6 | Amount (\$) \$197.00 | Payee address;City;State;Zip Code1600 Amphitheatre PkwyMountain View, CA 94043-1351 | | | | | | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Office Accounts (b) Description | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held | | | | | | |
| | Date 06/02/2025 | Payee name Google | | | | | | | |
| | Amount (\$) \$12.96 | Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043-1351 | | | | | | | |
| | PURPOSE OF EXPENDITURE | | l outside of Texas. Complete Schedule T. n, TX, officeholder living expense Age | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held | | | | | | |
| | Date | Payee name | | | | | | | |
| | 02/11/2025 | Greenway Coffee | | | | | | | |
| | Amount (\$) \$26.72 | Payee address;City;State;Zip Code3 E Greenway Plaza | | | | | | | |
| | | Houston, TX 77046 | | | | | | | |
| | PURPOSE OF EXPENDITURE | | l outside of Texas. Complete Schedule T. n, TX, officeholder living expense | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held | | | | | | |
| | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | | |
|---|---|-----|--------------------------------------|--|--------------------|--|------------------------------|-------|--|----------------------------|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | nmittee | Event Expense Fees Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu | Expense | Office Ove Polling Exp Printing Ex Salaries/W | pense ages/Contract Labor | | Travel in District Travel Out of Dis | quipment & Related Expense | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAM | E | | | | 3 | Filer ID | (Ethics Commission Filers) | | |
| | Sch: 19/41 Rpt: | | Talarico, Ja | ames (The Hono | rable) | | | | 00081913 | | | |
| 4 | Date | 5 | Payee name | 2 | | | | | | | | |
| | 03/03/2025 | | 2 | Hampton Inn & Suites | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; State; Zip Code | | | | | | | | | |
| - | \$181.10 | | 1570 Mira Lago Blvd | | | | | | | | | |
| | | | | 5 | | | | | | | | |
| | | | Farmers B | ranch, TX 75234 | | | | | | | | |
| 8 | PURPOSE | (a) | | See Categories listed at th | | | (b) Description | | | | | |
| ľ | OF | (") | Travel Out | | ie top of this sch | iedule) | | outs | ide of Texas. Com | plete Schedule T. | | |
| | EXPENDITURE | | | 01 2 10 11 00 | | | Check if Austin | n, TX | , officeholder living |) expense | | |
| | | | | | | | Hotel | | | | | |
| | | | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Of | ficeholder name | C | Office sou | ght | | Office he | eld | | |
| | Date | | Payee name | 9 | | | | | | | | |
| | 03/03/2025 | | Hampton I | nn & Suites | | | | | | | | |
| | Amount (\$) | | Payee addre | ess; City; | State | ; Zip Co | de | | | | | |
| | \$185.09 | | 1570 Mira | Lago Blvd | | | | | | | | |
| | | | Farmers B | ranch, TX 75234 | | | | | | | | |
| | PURPOSE OF EXPENDITURE | (a) | Category (s Travel Out | See Categories listed at th of District | ne top of this sch | iedule) | | | ide of Texas. Com , officeholder living | | | |
| | | | | | | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Of | ficeholder name | C | Office sou | ght | | Office he | eld | | |
| | | _ | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | | |
| | 03/10/2025 | | Harry & Da | | | | | | | | | |
| | Amount (\$) | | Payee addre | - | State | ; Zip Co | de | | | | | |
| | \$21.64 | | 2500 S PA | CIFIC HWY | | | | | | | | |
| | | | Medford, C | DR 97501 | | | | | | | | |
| | PURPOSE | (a) | Category (S | See Categories listed at th | ne top of this sch | iedule) | (b) Description | | | | | |
| | OF EXPENDITURE | | Office Ove | rhead/Rental Exp | oense | | | | ide of Texas. Com , officeholder living | | | |
| - | Complete ONLY if direct | L(| Candidate/Of | ficeholder name | (| Dffice sou | ght | | Office he | eld | | |
| | expenditure to benefit C/OF | | | | | | - | | | | | |
| - | | | | | | | | | | | | |
| | | | | | | | | | | | | |

| | | | EXPENDITURE CAT | EGORIES F | DR E | 3OX 8(a) | | | | | |
|---|---|---------------|---|--|---|---|-------|---|--|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | / - Il Coi | Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense | Loan R Office (Polling Printing Salarie | epayn Overhe Expen Expe S/Wag | nent/Reimbursement ead/Rental Expense ise nse es/Contract Labor | | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission Filers) | | | |
| | Sch: 20/41 Rpt: | | Talarico, James (The Honorable)00081913 | | | | | | | | |
| 4 | Date | 5 | Payee name | | | | I | | | | |
| | 03/10/2025 | | Harry & David | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; | State; Zip (| Code | ! | | | | | |
| | \$86.59 | | 2500 S PACIFIC HWY | | | | | | | | |
| | | | | | | | | | | | |
| | | | Medford, OR 97501 | | | | | | | | |
| 8 | PURPOSE | (a) | Category (See Categories listed at the top of | | (b |) Description | | | | | |
| - | OF | | Office Overhead/Rental Expense | | | | outsi | ide of Texas. Complete Schedule T. | | | |
| | EXPENDITURE | | | | | | , TX, | , officeholder living expense | | | |
| | | | | | | Gift | | | | | |
| | | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | Office s | ough | t | | Office held | | | |
| | Date | | Payee name | | | | | | | | |
| | 01/02/2025 | | Hill Country Springs | | | | | | | | |
| | Amount (\$) | | Payee address; City; | State; Zip (| Code | | | | | | |
| | \$22.40 | | 10019 S IH 35 Frontage Rd | | | | | | | | |
| | | | Austin, TX 78747 | | | | | | | | |
| | PURPOSE | (a) | Category (See Categories listed at the top of | this schedule) | (b |) Description | | | | | |
| | OF EXPENDITURE | | Food/Beverage Expense | | | | | ide of Texas. Complete Schedule T. | | | |
| | | | | | | Office water | | , officeholder living expense | | | |
| | | | | | | Onice water | | | | | |
| | Complete ONLY if direct | | Candidate/Officeholder name | Office s |) Duah | t | | Office held | | | |
| | expenditure to benefit C/OI | | | | 5 | | | | | | |
| | Date | Г | Payee name | | | | | | | | |
| | 02/03/2025 | | Hill Country Springs | | | | | | | | |
| | Amount (\$) | | , , , , | State; Zip (| Code | | | | | | |
| | \$31.15 | | 10019 S IH 35 Frontage Rd | otato,p | | | | | | | |
| | | | g | | | | | | | | |
| | | | Austin, TX 78747 | | | | | | | | |
| | PURPOSE OF | (a) | Category (See Categories listed at the top of | this schedule) | (b |) Description | | | | | |
| | EXPENDITURE | | Food/Beverage Expense | | | | | ide of Texas. Complete Schedule T. , officeholder living expense | | | |
| | | | | | | Office water | | | | | |
| | | | | | | | | | | | |
| | Complete ONLY if direct | L(| Candidate/Officeholder name | Office s | bugh | t | | Office held | | | |
| | expenditure to benefit C/OI | | | | 5 | | | | | | |
| - | | | | | | | | | | | |
| | | | | | | | | | | | |

| Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment | | | | | | | | |
|---|---|--|--|--|--|--|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) | | | | | | | |
| Sch: 21/41 Rpt: | Talarico, James (The Honorable) 00081913 | | | | | | | |
| 4 Date | | | | | | | | |
| 03/03/2025 | 5 Payee name Hill Country Springs | | | | | | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | | | | | | | |
| \$90.64 | 10019 S IH 35 Frontage Rd | | | | | | | |
| | Austin, TX 78747 | | | | | | | |
| 8 PURPOSE OF EXPENDITURE | F Food/Beverage Expense | | | | | | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/C | Candidate/Officeholder name Office sought Office held H | | | | | | | |
| Date | Payee name | | | | | | | |
| 04/01/2025 | Hill Country Springs | | | | | | | |
| Amount (\$) | Payee address; City; State; Zip Code | | | | | | | |
| \$136.65 | 10019 S IH 35 Frontage Rd Austin, TX 78747 | | | | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office water cooler | | | | | | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/C | Candidate/Officeholder name Office sought Office held H | | | | | | | |
| Date | Payee name | | | | | | | |
| 05/01/2025 | Hill Country Springs | | | | | | | |
| Amount (\$) \$144.64 | Payee address; City; State; Zip Code 10019 S IH 35 Frontage Rd | | | | | | | |
| | Austin, TX 78747 | | | | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office water cooler | | | | | | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/C | Candidate/Officeholder name Office sought Office held H | | | | | | | |
| | | | | | | | | |

| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Office Overhead/Rental B Food/Beverage Expense Gift/Awards/Memorials Expense Eugal Services Calaries/Wages/Contract The Instruction Guide explains how to complete this | ursement Solicitation/Fundraising Expense Expense Transportation Equipment & Related Expense Travel in District Travel Out of District t Labor OTHER (enter a category not listed above) | | | | | |
|---|---|--|--|--|--|--|--|--|
| 1 | Total pages Schedule F1: | FII FR NAME | 3 Filer ID (Ethics Commission Filers) | | | | | |
| - | Sch: 22/41 Rpt: | Talarico, James (The Honorable) | 00081913 | | | | | |
| 4 | Date | Payee name | | | | | | |
| | 06/02/2025 | Hill Country Springs | | | | | | |
| 6 | Amount (\$) \$76.65 | Payee address; City; State; Zip Code 10019 S IH 35 Frontage Rd Austin, TX 78747 | | | | | | |
| 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense OF EXPENDITURE OF Check if Austin, TX, officeholder living expense Office water cooler | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held | | | | | |
| | Date | Payee name | | | | | | |
| | 02/03/2025 | Hinojosa, Gina | | | | | | |
| | Amount (\$) \$400.00 | Payee address; City; State; Zip Code 1142 Gunter St #201 Austin, TX 78721 | | | | | | |
| | PURPOSE OF EXPENDITURE | | eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held | | | | | |
| | Date | Payee name | | | | | | |
| | 03/10/2025 | Hinojosa, Gina | | | | | | |
| | Amount (\$) \$200.00 | Payee address;City;State;ZipCode1142 Gunter St #201 | | | | | | |
| | | Austin, TX 78721 | | | | | | |
| | PURPOSE OF EXPENDITURE | | eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held | | | | | |
| | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | |
|---|---|----------|--|--|----------------------------------|------------------------|-------|---|--|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain | Office Ove Polling Ex Printing E Salaries/V | erhea penso xpens Vages | se s/Contract Labor | | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission Filers) | | | |
| | Sch: 23/41 Rpt: | | Talarico, James (The Honorable) | | | | | 00081913 | | | |
| 4 | Date | 5 | Payee name | | | | | | | | |
| | 04/01/2025 | | Hinojosa, Gina | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; Sta | te; Zip Co | ode | | | | | | |
| | \$200.00 | | 1142 Gunter St #201 | | | | | | | | |
| | | | | | | | | | | | |
| | | | Austin, TX 78721 | | | | | | | | |
| 8 | PURPOSE | | Category (See Categories listed at the top of this | | (b) | Description | | | | | |
| - | OF | | Salaries/Wages/Contract Labor | schedule) | (~) | - | outsi | de of Texas. Complete Schedule T. | | | |
| | EXPENDITURE | | | | | | , TX, | officeholder living expense | | | |
| | | | | | | Payroll | | | | | |
| | | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | Office sou | ight | | | Office held | | | |
| | Date | | Payee name | | | | | | | | |
| | 05/01/2025 | | Hinojosa, Gina | | | | | | | | |
| | Amount (\$) | | Payee address; City; Sta | ite; Zip Co | ode | | | | | | |
| | \$200.00 | | 1142 Gunter St #201 | | | | | | | | |
| | | | Austin, TX 78721 | | | | | | | | |
| | PURPOSE OF EXPENDITURE | (a) | Category (See Categories listed at the top of this salaries/Wages/Contract Labor | schedule) | (b) | | | de of Texas. Complete Schedule T. officeholder living expense | | | |
| | Complete ONLY if direct | | Candidate/Officeholder name | Office sou | l | | | Office held | | | |
| | expenditure to benefit C/OF | | | Onice Sou | iyin | | | Onice field | | | |
| | Data | <u> </u> | | | | | | | | | |
| | Date 05/30/2025 | | Payee name Hinojosa, Gina | | | | | | | | |
| | | <u> </u> | - | | | | | | | | |
| | Amount (\$) | | Payee address; City; Sta 1142 Gunter St #201 | ite; Zip Co | bae | | | | | | |
| | \$200.00 | | 1142 Guiller St #201 | | | | | | | | |
| | | | Austin, TX 78721 | | | | | | | | |
| | PURPOSE OF | (a) | Category (See Categories listed at the top of this | schedule) | (b) | Description | | | | | |
| | EXPENDITURE | | Salaries/Wages/Contract Labor | | | | | de of Texas. Complete Schedule T. officeholder living expense | | | |
| - | Complete ONLY if direct | <u></u> | Candidate/Officeholder name | Office sou | l Iaht | | | Office held | | | |
| | expenditure to benefit C/OF | | | 011100 000 | .gr. | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | | |
|---|---|-----|----------------------------|--|-------------------|---|---|---------------|--|----------------------------|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | mmittee | Event Expense Fees Food/Beverage Expens Gift/Awards/Memorials I Legal Services The Instruction Gu | e Expense | Loan Repa Office Ove Polling Exp Printing Ex Salaries/W | yment/Reimbursement rhead/Rental Expense ense pense ages/Contract Labor | | Travel in District Travel Out of Dis | quipment & Related Expense | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAM | íE | | | | 3 | Filer ID | (Ethics Commission Filers) | | |
| | Sch: 24/41 Rpt: | | Talarico, J | ames (The Honor | able) | | | | 00081913 | | | |
| 4 | Date | 5 | Payee name | e | | | | | | | | |
| | 03/03/2025 | | Hudson Ho | ouse | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee addre | ess; City; | State | ; Zip Co | Je | | | | | |
| | \$94.69 | | 4448 Lover | rs Ln | | | | | | | | |
| | | | | | | | | | | | | |
| | | | Dallas, TX | 75225 | | | | | | | | |
| 8 | PURPOSE | (a' | | See Categories listed at th | to a of this oak | (a) | (b) Description | | | | | |
| - | OF | | | see Categories listed at the erage Expense | e top of this sch | ieauie) | | outsi | ide of Texas. Com | plete Schedule T. | | |
| | EXPENDITURE | | | | | | | n, TX, | , officeholder living | expense | | |
| | | | | | | | Food | | | | | |
| | | | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Off | fficeholder name | | Office sou | Jht | | Office he | eld | | |
| | Date | Ē | Payee name | 9 | | | | | | | | |
| | 06/04/2025 | | Insomnia C | Cookies | | | | | | | | |
| | Amount (\$) | | Payee addre | ess; City; | State | ; Zip Co | de | | | | | |
| | \$34.32 | | 2323 San A | Antonio St | | | | | | | | |
| | | | | | | | | | | | | |
| | | | Austin, TX | 78705 | | | | | | | | |
| | PURPOSE | (a) | Category (| See Categories listed at th | e top of this sch | nedule) | (b) Description | | | | | |
| | OF EXPENDITURE | | | erhead/Rental Exp | | | | | ide of Texas. Com | • | | |
| | | | | | | | Gift | | | | | |
| | | | | | | | GIIL | | | | | |
| | Complete ONLY if direct | Ľ | Condidate/Of | fficeholder name | | Office sou | | t Office held | | | | |
| | expenditure to benefit C/OF | | | | | Juice sour | JUL | | Unice in | eiu | | |
| | | — | | | | | | | | | | |
| | Date 01/21/2025 | | Payee name Intuit Quick | | | | | | | | | |
| | | ⊢ | | | Ctata | 7:- 00 | <u>.</u> | | | | | |
| | Amount (\$) | | Payee addre | | State | e; Zip Co | le | | | | | |
| | \$25.58 | | 2632 Marir | ne vvay | | | | | | | | |
| | | | | | | | | | | | | |
| | | | Mountain V | View, CA 94043 | | r | | | | | | |
| | PURPOSE OF | (a) | | See Categories listed at th | e top of this sch | nedule) | (b) Description | | | | | |
| | EXPENDITURE | | Accounting | g/Banking | | | | | ide of Texas. Com , officeholder living | • | | |
| | | | | | | | Payroll Softw | | | Схрензе | | |
| | | | | | | | · ····· | | | | | |
| | Complete ONLY if direct | Ľ | Candidate/Of | fficeholder name | (| Office sou | ht | | Office he | 키 너 | | |
| | expenditure to benefit C/OF | | Junuau. | | | Dines ere | jiit | | • | | | |
| | | | | | | | | | | | | |
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| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | |
|---|---|---|--|-------------------|------|---------------|-----|--|--|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | Fees Office Overhead/Rental Expense Transportation Equipment & I Food/Beverage Expense Polling Expense Travel in District y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District | | | | | | | | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission Filers) | | | |
| | Sch: 25/41 Rpt: | | Talarico, James (The Honorable) | | | | | 00081913 | | | |
| 4 | Date | 5 | Payee name | | | | | | | | |
| | 03/07/2025 | | Intuit Quickbooks | | | | | | | | |
| 6 | Amount (\$) | 7 | - | ate; Zip C | ode | | | | | | |
| ľ | \$85.28 | Ľ | 2632 Marine Way | ato, <u>Lip</u> o | ouo | | | | | | |
| | \$00.20 | | | | | | | | | | |
| | | | Mountain View, CA 04042 | | | | | | | | |
| | | | Mountain View, CA 94043 | | | | | | | | |
| 8 | PURPOSE OF | (a) | Category (See Categories listed at the top of this | s schedule) | (b) | Description | | | | | |
| | EXPENDITURE | | Accounting/Banking | | | | | de of Texas. Complete Schedule T. officeholder living expense | | | |
| | | | | | | Payroll Softw | | | | | |
| | | | | | | ., | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | | Candidate/Officeholder name | Office so | ught | | | Office held | | | |
| | experiature to benefit C/Or | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | |
| | 04/07/2025 | | Intuit Quickbooks | | | | | | | | |
| | Amount (\$) | | Payee address; City; St | ate; Zip C | ode | | | | | | |
| | \$85.28 | | 2632 Marine Way | | | | | | | | |
| | | | - | | | | | | | | |
| | | | Mountain View, CA 94043 | | | | | | | | |
| | PURPOSE | (a) | Category (See Categories listed at the top of this | schedule) | (b) | Description | | | | | |
| | OF EXPENDITURE | | Accounting/Banking | | | | | de of Texas. Complete Schedule T. | | | |
| | | | | | | Payroll Softw | | officeholder living expense | | | |
| | | | | | | Fayron Soltw | are | | | | |
| | Complete ONILV if direct | | Candidate/Officeholder name | Office so | | | | Office held | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | | Office SU | uyni | | | Office field | | | |
| _ | | 1 | | | | | | | | | |
| | Date | | Payee name | | | | | | | | |
| | 05/07/2025 | | Intuit Quickbooks | | | | | | | | |
| | Amount (\$) | | | ate; Zip C | ode | | | | | | |
| | \$85.28 | | 2632 Marine Way | | | | | | | | |
| | | | | | | | | | | | |
| | | | Mountain View, CA 94043 | | | | | | | | |
| | PURPOSE | (a) | Category (See Categories listed at the top of this | schedule) | (b) | Description | | | | | |
| | OF EXPENDITURE | | Accounting/Banking | , | | | | de of Texas. Complete Schedule T. | | | |
| | EXPENDITORE | | | | | | | officeholder living expense | | | |
| | | | | | | Payroll Softw | are | | | | |
| | | | | | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | Office so | ught | | | Office held | | | |
| | experiatione to benefit C/Of | | | | | | | | | | |
| | | | | | | | | | | | |
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| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | |
|--|---|---|--|---|---|--|-------------|---|--|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide expla | Office Ov Polling Ex Printing E Salaries/V | erhead/R kpense xpense Wages/C | Reimbursement eental Expense ontract Labor this form. | | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission Filers) | | | |
| | Sch: 26/41 Rpt: | | Talarico, James (The Honorable) | | | | | 00081913 | | | |
| 4 | Date | 5 | Payee name | | | | | | | | |
| | 06/09/2025 | | Intuit Quickbooks | | | | | | | | |
| 6 | Amount (\$) | nount (\$) 7 Payee address; City; State; Zip Code | | | | | | | | | |
| | \$85.28 | | 2632 Marine Way | • | | | | | | | |
| | | | - | | | | | | | | |
| | | | Mountain View, CA 94043 | | | | | | | | |
| 8 | PURPOSE | (a) | Category (See Categories listed at the top of this | | (b) r | escription | | | | | |
| ľ | OF | (~) | Accounting/Banking | s schedule) | | - | outsi | de of Texas. Complete Schedule T. | | | |
| | EXPENDITURE | | | | | Check if Austin, | TX, | officeholder living expense | | | |
| | | | | | F | ayroll Softwa | are | | | | |
| | | | | | | | | | | | |
| 9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office sought Office sought | | | | | | | Office held | | | | |
| | Date | | Payee name | | | | | | | | |
| | 01/03/2025 | | Intuit Quickbooks | | | | | | | | |
| | Amount (\$) | | Payee address; City; St | ate; Zip Co | ode | | | | | | |
| | \$91.68 | | 2632 Marine Way | | | | | | | | |
| | | | Mountain View, CA 94043 | | | | | | | | |
| | PURPOSE OF EXPENDITURE | (a) | Category (See Categories listed at the top of this Accounting/Banking | s schedule) | | _ | ΤX, | de of Texas. Complete Schedule T. officeholder living expense | | | |
| _ | Complete ONLY if direct | | Candidate/Officeholder name | Office sou | l Jaht | | | Office held | | | |
| | expenditure to benefit C/OF | Н | | | 5 | | | | | | |
| - | Date | | Payee name | | | | | | | | |
| | 02/03/2025 | | Krasne, Seth | | | | | | | | |
| | Amount (\$) | | | ate; Zip Co | aha | | | | | | |
| | \$1,220.00 | | 2311 S 4th Street | | Jue | | | | | | |
| | ψ1,220.00 | | | | | | | | | | |
| | | | Austin, TX 78704 | | i | | | | | | |
| | PURPOSE OF | (a) | Category (See Categories listed at the top of this | s schedule) | (b) D | escription | | de ef Teures, Complete Schedule T | | | |
| | EXPENDITURE | | Salaries/Wages/Contract Labor | | | | | de of Texas. Complete Schedule T. officeholder living expense | | | |
| - | Complete ONLY if direct | L(| Candidate/Officeholder name | Office sou | ı .ght | | | Office held | | | |
| | expenditure to benefit C/OF | | | | 5 | | | | | | |
| - | | | | | | | | | | | |
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| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | |
|---|---|---|--|---|-------------------------------|---|---|--|--|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide explains | Office Ove Polling Ex Printing Ex Salaries/M | pense /ages/Contract Labor | | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | | | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | 3 | Filer ID (Ethics Commission Filers) | | | | |
| | Sch: 27/41 Rpt: | | Talarico, James (The Honorable) | | | | 00081913 | | | | |
| 4 | Date 03/10/2025 | | Payee name Krasne, Seth | | | | | | | | |
| 6 | Amount (\$) \$200.00 | | Payee address; City; State 2311 S 4th Street Austin, TX 78704 | e; Zip Co | de | | | | | | |
| 8 | 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | andidate/Officeholder name | Office sou | ght | | Office held | | | | |
| | Date | | Payee name | | | | | | | | |
| | 04/01/2025 | | Krasne, Seth | | | | | | | | |
| | Amount (\$) \$200.00 | | Payee address; City; State 2311 S 4th Street Austin, TX 78704 | e; Zip Co | de | | | | | | |
| | PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this so Salaries/Wages/Contract Labor | chedule) | | | de of Texas. Complete Schedule T. officeholder living expense | | | | |
| | Complete ONLY if direct expenditure to benefit C/OF | | andidate/Officeholder name | Office sou | ght | | Office held | | | | |
| | Date | | Payee name | | | | | | | | |
| | 05/01/2025 | | Krasne, Seth | | | | | | | | |
| | Amount (\$) \$200.00 | | Payee address; City; State 2311 S 4th Street | e; Zip Co | de | | | | | | |
| | | | Austin, TX 78704 | | | | | | | | |
| | PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this so Salaries/Wages/Contract Labor | chedule) | | | de of Texas. Complete Schedule T. . officeholder living expense | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | andidate/Officeholder name | Office sou | ght | | Office held | | | | |
| | | | | | | | | | | | |

| | | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | |
|---|---|---|-------------------------|---|-----------------------------------|---|--|--------|---|----------------------------|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | mmittee | Event Expense Fees Food/Beverage Exp Gift/Awards/Memor Legal Services | pense | Loan Repa Office Ove Polling Exp Printing Ex Salaries/W | yment/Reimbursement rhead/Rental Expense pense pense ages/Contract Labor | | Travel in District Travel Out of Dis | quipment & Related Expense | |
| - | Tatal samo Cohodulo E1 | 5 | | | Guiue explains | | npiete triis form. | 1 | | (Ethics Commission Filors) | |
| 1 | Total pages Schedule F1: Sch: 28/41 Rpt: | 2 | | mes (The Ho | norable) | | | 3 | Filer ID 00081913 | (Ethics Commission Filers) | |
| 4 | Date | 5 | Payee name | | | | | | | | |
| | 05/30/2025 | | Krasne, Set | h | | | | | | | |
| 6 | Amount (\$) | mount (\$) 7 Payee address; City; State; Zip Code | | | | | | | | | |
| | \$200.00 | | 2311 S 4th S | Street | | | | | | | |
| | | | | | | | | | | | |
| | | | Austin, TX 7 | | | | | | | | |
| 8 | PURPOSE OF | (a) | | | at the top of this sch | nedule) | (b) Description | 4-1 | | | |
| | EXPENDITURE | | Salaries/Wa | ages/Contract | Labor | | | | ide of Texas. Com , officeholder living | | |
| | | | | | | | Payroll | I, I, | , Uniceriolae | САРСнас | |
| | | | | | | | | | | | |
| 9 Complete ONLY if direct Candidate/Officeholder name Office expenditure to benefit C/OH | | | | | | Office sou | ght | | Office he | eld | |
| | Date | | Payee name | | | | | | | | |
| | 02/27/2025 | | Legislative S | Study Group | | | | | | | |
| - | Amount (\$) | ┢ | Payee addres | ss; City; | State | ; Zip Co | de | | | | |
| | \$1,000.00 | | PO Box 129 | | | · • | | | | | |
| | | | • • • • | | | | | | | | |
| | | | Austin, TX 7 | '8711 | | | | | | | |
| | PURPOSE OF EXPENDITURE | (a) | | ee Categories listed head/Rental E | at the top of this sch Expense | nedule) | | | ide of Texas. Com , officeholder living | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Offic | ceholder name | C | Office sou | ght | | Office he | ld | |
| | Date | Γ | Payee name | | | | | | | | |
| | 02/13/2025 | | Lyft | | | | | | | | |
| | Amount (\$) | ┢ | Payee addres | ss; City; | State: | ; Zip Co | de | | | | |
| | \$29.17 | | 185 Berry Si | | , | , <u>–</u> p – . | | | | | |
| | *=**= | | Suite 400 | | | | | | | | |
| | | | | | - | | | | | | |
| | | | | co, CA 9410 | | | | | | | |
| | PURPOSE OF | (a) | | | at the top of this sch | , | (b) Description | : | | | |
| | EXPENDITURE | | Transportati Expense | on Equipmer | nt And Related | d | | ı, ТХ, | ide of Texas. Comj , officeholder living | | |
| | Complete ONLY if direct | <u> </u> | Candidate/Offi | ceholder name | C | Office sou | ght | | Office he | ld | |
| | expenditure to benefit C/OF | | | | | - • | - | | | | |
| | | | | | | | | | | | |
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| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | |
|---|--|---|---|---|--|--|--|--|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | Event Expense Loan Re Fees Office O Food//Beverage Expense Polling E Gift/Awards/Memorials Expense Printing | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | | | | | | | |
| 1 | Total pages Schedule F1: | FILER NAME | | 3 Filer ID (Ethics Commission Filers) | | | | | | |
| | Sch: 29/41 Rpt: | Falarico, James (The Honorable) | | 00081913 | | | | | | |
| 4 | Date 03/18/2025 | 5 Payee name Mailchimp | | | | | | | | |
| 6 | Amount (\$) | Payee address; City; State; Zip C | ode | | | | | | | |
| | \$21.32 675 Ponce De Leon Ave Ne Suite 5000 Atlanta, GA 30308 | | | | | | | | | |
| 8 | 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Email software | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | andidate/Officeholder name Office so | ught | Office held | | | | | | |
| | Date | Payee name | | | | | | | | |
| | 04/18/2025 | Mailchimp | | | | | | | | |
| | Amount (\$) | Payee address; City; State; Zip C | ode | | | | | | | |
| | \$21.32 | 375 Ponce De Leon Ave Ne Suite 5000 Atlanta, GA 30308 | | | | | | | | |
| | PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | outside of Texas. Complete Schedule T. , TX, officeholder living expense r e | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | andidate/Officeholder name Office so | ught | Office held | | | | | | |
| | Date | Payee name | | | | | | | | |
| | 05/19/2025 | Aailchimp | | | | | | | | |
| | Amount (\$) | Payee address; City; State; Zip C | ode | | | | | | | |
| | \$21.32 | 75 Ponce De Leon Ave Ne Suite 5000 | | | | | | | | |
| | | Atlanta, GA 30308 | İ.a. | | | | | | | |
| | PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | outside of Texas. Complete Schedule T. , TX, officeholder living expense re | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | andidate/Officeholder name Office so | ught | Office held | | | | | | |
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| | | EXPENDITURE CATEGORIES FOR BOX 8 | (a) | | | | | | |
|---|--|---|---|--|--|--|--|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | Event ExpenseLoan Repayment/ReiFeesOffice Overhead/RenFood/Beverage ExpensePolling ExpenseGift/Awards/Memorials ExpensePrinting Expense | imbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | | | | | | |
| 1 | Total pages Schedule F1: | FILER NAME | 3 Filer ID (Ethics Commission Filers) | | | | | | |
| | Sch: 30/41 Rpt: | Talarico, James (The Honorable) | 00081913 | | | | | | |
| 4 | Date 06/18/2025 | Payee name Mailchimp | | | | | | | |
| 6 | Amount (\$) | Payee address; City; State; Zip Code | | | | | | | |
| | \$21.32 675 Ponce De Leon Ave Ne Suite 5000 Atlanta, GA 30308 | | | | | | | | |
| 8 | 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Email software | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | andidate/Officeholder name Office sought | Office held | | | | | | |
| | Date | Payee name | | | | | | | |
| | 01/17/2025 | Men 4 Choice Education | | | | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | | | | | | | |
| | \$250.00 | 3420 Whirlaway Dr Northbrook, IL 60062 | | | | | | | |
| | PURPOSE OF EXPENDITURE | Contributions/Donations Made By Candidate/Officeholder/Political Committee | scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense omen's March Sponsorship | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | andidate/Officeholder name Office sought | Office held | | | | | | |
| | Date | Payee name | | | | | | | |
| | 01/02/2025 | NGP VAN | | | | | | | |
| | Amount (\$) | Payee address; City; State; Zip Code | | | | | | | |
| | \$105.00 | 1445 New York Ave NW | | | | | | | |
| | | Ste 200 | | | | | | | |
| | | Washington, DC 20005-2158 | | | | | | | |
| | PURPOSE OF EXPENDITURE | Solicitation/Fundraising Expense | scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense tabase software | | | | | | |
| | Complete ONLY if direct expenditure to benefit C/OF | andidate/Officeholder name Office sought | Office held | | | | | | |
| | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | |
|---|---|----------------|---|---|--|---|-------|---|--|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense | Loan Repa Office Ove Polling Ex Printing E Salaries/W | ayme erhea pense xpens Vages | nt/Reimbursement d/Rental Expense e se s/Contract Labor | | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission Filers) | | | |
| | Sch: 31/41 Rpt: | | Talarico, James (The Honorable) | | | | | 00081913 | | | |
| 4 | Date | 5 | Payee name | | | | | | | | |
| | 02/06/2025 | S/2025 NGP VAN | | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; St | ate; Zip Co | ode | | | | | | |
| | \$105.00 | | 1445 New York Ave NW | | | | | | | | |
| | | | Ste 200 | | | | | | | | |
| | | | Washington, DC 20005-2158 | | | | | | | | |
| 8 | PURPOSE | (a) | Category (See Categories listed at the top of this | s schedule) | (b) | Description | | | | | |
| | OF EXPENDITURE | | Solicitation/Fundraising Expense | | | | | de of Texas. Complete Schedule T. | | | |
| | | | | | | Database sof | | officeholder living expense | | | |
| | | | | | | | | | | | |
| 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH | | | | | | | | Office held | | | |
| | Date | Γ | Payee name | | | | _ | | | | |
| | 04/07/2025 | | NGP VAN | | | | | | | | |
| | Amount (\$) | \square | Payee address; City; St | ate; Zip Co | ode | | | | | | |
| | \$110.25 | | 1445 New York Ave NW | | | | | | | | |
| | | | Ste 200 | | | | | | | | |
| | | | Washington, DC 20005-2158 | | | | | | | | |
| | PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this Solicitation/Fundraising Expense | s schedule) | (b) | | | de of Texas. Complete Schedule T. officeholder living expense | | | |
| | | | | | | Database sof | ftwa | are | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | Office sou | ight | | | Office held | | | |
| | Date | Γ | Payee name | | | | | | | | |
| | 04/28/2025 | | NGP VAN | | | | | | | | |
| | Amount (\$) | | Payee address; City; St | ate; Zip Co | ode | | | | | | |
| | \$110.25 | 1 | 1445 New York Ave NW | | | | | | | | |
| | | | Ste 200 | | | | | | | | |
| | | | Washington, DC 20005-2158 | | | | | | | | |
| | PURPOSE OF | | Category (See Categories listed at the top of this | s schedule) | (b) | Description | | | | | |
| | EXPENDITURE | | Solicitation/Fundraising Expense | | | | , тх, | de of Texas. Complete Schedule T. officeholder living expense Are | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | Office sou | ight | | | Office held | | | |
| | | | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | |
|---|---|----------|--|---|-----------------------------------|------------------------|-------------|---|--|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide exp | Office Ov Polling Ex Printing E Salaries/V | erhea kpens Expens Wages | se s/Contract Labor | | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission Filers) | | | |
| | Sch: 32/41 Rpt: | | Talarico, James (The Honorable) | | | | | 00081913 | | | |
| 4 | Date | 5 | Payee name | | | | | | | | |
| | 05/02/2025 | | NGP VAN | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; S | State; Zip Co | ode | | | | | | |
| | \$110.25 | | 1445 New York Ave NW | | | | | | | | |
| | | | Ste 200 | | | | | | | | |
| | | | Washington, DC 20005-2158 | | | | | | | | |
| 8 | PURPOSE | (a) | Category (See Categories listed at the top of the | | (b) | Description | | | | | |
| - | OF | | Solicitation/Fundraising Expense | lis scriedule) | | | outsi | de of Texas. Complete Schedule T. | | | |
| | EXPENDITURE | | 5 1 | | | Check if Austin | , TX, | officeholder living expense | | | |
| | | | | | | Database sof | twa | are | | | |
| | | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | | Candidate/Officeholder name | Office sou | ught | | | Office held | | | |
| | Date | | Payee name | | | | | | | | |
| | 06/03/2025 | | NGP VAN | | | | | | | | |
| | Amount (\$) | | Payee address; City; S | State; Zip Co | ode | | | | | | |
| | \$110.25 | | 1445 New York Ave NW | | | | | | | | |
| | | | Ste 200 | | | | | | | | |
| | | | Washington, DC 20005-2158 | | | | | | | | |
| | PURPOSE | (a) | Category (See Categories listed at the top of the | nis schedule) | (b) | Description | | | | | |
| | OF EXPENDITURE | | Solicitation/Fundraising Expense | | | | outsi | de of Texas. Complete Schedule T. | | | |
| | EXPENDITORE | | | | | | | officeholder living expense | | | |
| | | | | | | Database sof | twa | are | | | |
| | | | | | | | Office held | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | Office sou | ignt | | | Onice field | | | |
| | | <u> </u> | | | | | | | | | |
| | Date | | Payee name | | | | | | | | |
| | 06/05/2025 | | Nothing Bundt Cake | | | | | | | | |
| | Amount (\$) | | | State; Zip Co | ode | | | | | | |
| | \$30.00 | | 1201 Barbara Jordan Blvd | | | | | | | | |
| | | | Ste 680 | | | | | | | | |
| | | | Austin, TX 78723 | | | | | | | | |
| | PURPOSE | (a) | Category (See Categories listed at the top of the | nis schedule) | (b) | Description | | | | | |
| | OF EXPENDITURE | | Food/Beverage Expense | | | | | de of Texas. Complete Schedule T. | | | |
| | | | | | | | , IX, | officeholder living expense | | | |
| | | | | | | | | | | | |
| - | Complete ONLY if direct | | Candidate/Officeholder name | Office sou | l Jaht | | | Office held | | | |
| | expenditure to benefit C/Oł | | analato enteriorati nume | | -911 | | | | | | |
| - | | | | | | | | | | | |
| | | | | | | | | | | | |

| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | / - al Con | EXPENDITURE CATEGOR Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains | Loan Rep Office Ove Polling Ex Printing E Salaries/V | aymei erhead pense xpens Vages | nt/Reimbursement d/Rental Expense e se //Contract Labor | | Transportation E Travel in District Travel Out of Di | | | |
|---|---|---------------|--|--|--|---|-------|--|----------------------------|--|--|
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | 3 | Filer ID | (Ethics Commission Filers) | | |
| - | Sch: 33/41 Rpt: | [| Talarico, James (The Honorable) | | | | ľ | 00081913 | (| | |
| 4 | Date | 5 | Payee name | | | | | | | | |
| - | 01/02/2025 | | Paragon Solutions | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; State; | Zip Co | ode | | | | | | |
| | \$25.27 | | 2141 E Broadway Rd | • | | | | | | | |
| | +=0.=1 | | Ste 202 | | | | | | | | |
| | | | | | | | | | | | |
| | | | Tempe, AZ 85282-1895 | | | | | | | | |
| 8 | PURPOSE | (a) | Category (See Categories listed at the top of this sch | edule) | (b) | Description | | | | | |
| | OF EXPENDITURE | | Solicitation/Fundraising Expense | - | | Check if travel | outsi | de of Texas. Con | nplete Schedule T. | | |
| | EXPENDITORE | | | Check if Austin, TX, officeholder living expense | | | | | | | |
| | | | | | | Donation Pro | ces | ssing Fees | | | |
| | | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/O | | Candidate/Officeholder name C | Office sou | ight | | | Office h | eld | | |
| | Date | | Payee name | | | | | | | | |
| | 02/03/2025 | | Paragon Solutions | | | | | | | | |
| | Amount (\$) | - | | Zip Co | aha | | | | | | |
| | ., | | | | Juc | | | | | | |
| | \$5.00 | | 2141 E Broadway Rd | | | | | | | | |
| | | | Ste 202 | | | | | | | | |
| | | | Tempe, AZ 85282-1895 | | | | | | | | |
| | PURPOSE | (a) | Category (See Categories listed at the top of this sch | edule) | (b) | Description | | | | | |
| | OF | | Solicitation/Fundraising Expense | , | | | outsi | de of Texas. Con | nplete Schedule T. | | |
| | EXPENDITURE | | 5 1 | | | Check if Austin | , TX, | officeholder living | g expense | | |
| | | | | | | Donation Pro | ces | ssing Fees | | | |
| | | | | | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | | Candidate/Officeholder name C | Office sou | ight | | | Office h | eld | | |
| | experialitate to benefit 6/01 | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | |
| | 03/03/2025 | | Paragon Solutions | | | | | | | | |
| | Amount (\$) | ╞ | Payee address; City; State; | Zip Co | ode | | | | | | |
| | \$5.00 | | 2141 E Broadway Rd | | | | | | | | |
| | ψ5.00 | | - | | | | | | | | |
| | | | Ste 202 | | | | | | | | |
| | | | Tempe, AZ 85282-1895 | | | | | | | | |
| | PURPOSE | (a) | Category (See Categories listed at the top of this sch | edule) | (b) | Description | | | | | |
| | | | Solicitation/Fundraising Expense | | | Check if travel | outsi | de of Texas. Con | nplete Schedule T. | | |
| | EXPENDITURE | | | | | Check if Austin | , TX, | officeholder living | g expense | | |
| | | | | | | Donation Pro | ces | ssing Fees | | | |
| | | | | | | | | | | | |
| | Complete ONLY if direct | . (| Candidate/Officeholder name C | Office sou | ight | | | Office h | eld | | |
| | expenditure to benefit C/OI | Н | | | - | | | | | | |
| - | | | | | | | | | | | |
| | | | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | |
|--|---|----------------|--|--|------------|------------|------------------------|--|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | / - Il Comr | Event Expense Fees Food/Beverage Exper Gift/Awards/Memorials hittee Legal Services | Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense | | | | | draising Expense Equipment & Related Expense t strict a category not listed above) | |
| 1 | Total pages Schedule F1: | 2 F | ILER NAME | | | | 3 | Filer ID | (Ethics Commission Filers) | |
| | Sch: 34/41 Rpt: | | alarico, James (The Hond | orable) | | | | 00081913 | · · · · · | |
| 4 | Date | 5 F | ayee name | | | | | | | |
| - | 04/02/2025 | | Paragon Solutions | | | | | | | |
| 6 | Amount (\$) \$5.00 | 2 | ayee address; City; 141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895 | State; | ; Zip Co | nde | | | | |
| 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Donation Processing Fees | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | ndidate/Officeholder name | C | Office sou | ght | | Office h | eld | |
| | Date | F | ayee name | | | | | | | |
| | 05/02/2025 | F | Paragon Solutions | | | | | | | |
| | Amount (\$) | F | Payee address; City; | State | Zip Co | ode | | | | |
| | \$5.00 | 5 | 141 E Broadway Rd Ste 202 Tempe, AZ 85282-1895 | | | | | | | |
| | PURPOSE OF EXPENDITURE | | Category (See Categories listed at Colicitation/Fundraising Ex | | edule) | Check if A | avel outs ustin, TX | side of Texas. Con K, officeholder livin SSING FeeS | nplete Schedule T. g expense | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | ndidate/Officeholder name | C | Office sou | ght | | Office h | eld | |
| | Date | F | ayee name | | | | | | | |
| | 06/02/2025 | | Paragon Solutions | | | | | | | |
| | Amount (\$) \$5.00 | 2 | Payee address; City; 141 E Broadway Rd Ste 202 Fempe, AZ 85282-1895 | State; | ; Zip Co | ode | | | | |
| | PURPOSE OF EXPENDITURE | | Category (See Categories listed at Solicitation/Fundraising Ex | | edule) | Check if A | avel outs ustin, TX | side of Texas. Con (, officeholder livin :SSING Fees | nplete Schedule T. g expense | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | ndidate/Officeholder name | C | Office sou | ght | | Office h | eld | |
| | | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | |
|---|---|---|--------------------------------------|----------------------|--------------------------|------------|------------|--|---|---------------------|----------------------------|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | Event Expense Loan Repayment/Reinbursement So Fees Office Overhead/Rental Expense Tra Food/Beverage Expense Polling Expense Tra e By - Gift/Awards/Memorials Expense Printing Expense Tra | | | | | | Transportation E Travel in District Travel Out of Di | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | | |
| 1 | Total pages Schedule F1: | 2 | | = | | | | | 3 | Filer ID | (Ethics Commission Filers) |
| - | Sch: 35/41 Rpt: | [_ | | - Imes (The Ho | norable) | | | | ľ | 00081913 | () |
| | | | | | norable) | | | | | 00001913 | |
| 4 | Date | 5 | Payee name | | | | | | | | |
| | 02/20/2025 | | Pastors for | Children | | | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; State; Zip Code | | | | | | | | |
| | \$250.00 | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | E . (1) (1) | TX 704 47 | | | | | | | |
| | | | Fort Worth, | TX 76147 | | | _ | | | | |
| 8 | PURPOSE | (a) | Category (S | ee Categories listed | I at the top of this sch | edule) | (b) | Description | | | |
| | OF EXPENDITURE | | Contribution | ns/Donations | Made By | | | Check if travel | outsi | de of Texas. Com | nplete Schedule T. |
| | | | Candidate/ | Officeholder/F | Political Comm | ittee | | | , TX, | officeholder living | g expense |
| | | | | | | | | Donation | | | |
| | | | | | | | | | | | |
| 9 | Complete ONLY if direct | | Candidate/Off | iceholder name | e (| Office sou | ight | | | Office h | eld |
| | expenditure to benefit C/OI | Н | | | | | | | | | |
| | Date | | Payee name | | | | | | | | |
| | 02/25/2025 | | - | Area Democ | ratic Club | | | | | | |
| | | | - | | | 7. 0 | | | | | |
| | Amount (\$) | | Payee addre | - | State | Zip Co | bde | | | | |
| | \$500.00 PO Box 2655 | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | Pflugerville | TX 78691 | | | | | | | |
| | PURPOSE | (a) | Category (c | oo Cotogorioo liotoo | I at the top of this sch | odulo) | (b) | Description | | | |
| | OF | 1 • 7 | | ns/Donations | | euule) | , | _ | outsi | de of Texas. Corr | nplete Schedule T. |
| | EXPENDITURE | | | | Political Comm | ittee | | Check if Austin | , тх, | officeholder living | g expense |
| | | | | | | | | Contribution | | | |
| | | | | | | | | | | | |
| | Complete ONLY if direct | (| Candidate/Off | iceholder name | <u>, (</u> | Office sou | l Iaht | | | Office h | eld |
| | expenditure to benefit C/Oł | | | | | | .g | | | 0110011 | |
| _ | _ | _ | | | | | | | | | |
| | Date | | Payee name | | | | | | | | |
| | 01/27/2025 | | Taco Joint | | | | | | | | |
| | Amount (\$) | | Payee addre | ss; City; | State | Zip Co | ode | | | | |
| | \$39.96 | | 2809 San J | acinto BLVD | | | | | | | |
| | | | | | | | | | | | |
| | | | Austin, TX | 78705 | | | | | | | |
| | DUDDOOT | | | | | | <i>a</i> • | | | | |
| | PURPOSE OF | (a) | | | I at the top of this sch | edule) | (b) | Description | | | |
| | EXPENDITURE | | Food/Bever | age Expense | 9 | | | | | officeholder living | nplete Schedule T. |
| | | | | | | | | Food | , 17, | | g expense |
| | | | | | | | | 1 000 | | | |
| | | | | | | | Ļ | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Off | iceholder name | e (| Office sou | ight | | | Office h | eld |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | |
|--|---|---------------------------------|---|--------------|-------------|-----------------|----------|---|---|--|--|
| Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Commi Credit Card Payment | | | Fees Office Overhead/Rental Expense Tra Food/Beverage Expense Polling Expense Tra By - Gift/Awards/Memorials Expense Printing Expense Tra | | | | | Transportation E Travel in District Travel Out of Dis | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | 3 | Filer ID | (Ethics Commission Filers) | | |
| | Sch: 36/41 Rpt: | | Talarico, James (The Honorable | e) | | | | 00081913 | | | |
| 4 | Date | 5 | Payee name | | | | <u> </u> | | | | |
| | 03/04/2025 | | Texas House LGBTQ Caucus | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; | State; | Zip Coc | е | | | | | |
| | \$800.00 | | P.O. Box 2960 | | | | | | | | |
| | | | | | | | | | | | |
| | | | Austin, TX 78769 | | | | | | | | |
| 8 | PURPOSE | (a) | Category (See Categories listed at the top | of this sche | edule) | b) Description | | | | | |
| | OF EXPENDITURE | | Contributions/Donations Made | | | Check if travel | | ide of Texas. Com | | | |
| | EAPENDITURE | | Candidate/Officeholder/Political | I Commi | ittee | | і, TX, | , officeholder living | expense | | |
| | | | | | | Dues | | | | | |
| | Complete ONIL V if direct | Ľ | | | | L.1 | | Office he | . 1 . 1 | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | | Office soug | nt | | Office he | 90 | | |
| | Date | | Payee name | | | | | | | | |
| | 02/18/2025 | | Texas Southern University Four | ndation | | | | | | | |
| | Amount (\$) | | Payee address; City; | State; | Zip Coc | е | | | | | |
| | \$2,500.00 | \$2,500.00 3100 Cleburne Street | | | | | | | | | |
| | | | Houston, TX 77004 | | | | | | | | |
| | PURPOSE OF | (a) | Category (See Categories listed at the top | | edule) | b) Description | tei | of Toyon Com | -l-t- Cabadula T | | |
| | EXPENDITURE | | Contributions/Donations Made Candidate/Officeholder/Political | | ittee | | | ide of Texas. Com , officeholder living | | | |
| | | | Canada Concension on the | 10011 | | Texas Legisl | | - | • | | |
| | | | | | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | 0 | Office soug | ht | | Office he | eld | | |
| | Date | Γ | Payee name | | | | | | | | |
| | 04/25/2025 | | Travis County Democratic Party | v | | | | | | | |
| \vdash | Amount (\$) | ┢ | Payee address; City; | - | Zip Coc | ρ | | | | | |
| | \$5,000.00 | | 1311 E 6th St #B | C, | 19 | | | | | | |
| | , | | | | | | | | | | |
| | | | Austin, TX 78702 | | | | | | | | |
| | PURPOSE OF | (a) | Category (See Categories listed at the top | | edule) | b) Description | | de ef Teures Oren | alata Cabadula T | | |
| | EXPENDITURE | | Contributions/Donations Made Candidate/Officeholder/Political | | ittee | | | ide of Texas. Com , officeholder living | • | | |
| | | | Candidate/Onicenolden/i Onica | Comm | litee | JBR Sponsor | | | | | |
| | | | | | | · | | | | | |
| | Complete ONLY if direct | <u> </u> | Candidate/Officeholder name | 0 | Office soug | ht | | Office he | eld | | |
| | expenditure to benefit C/OF | н | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | | |
|---|--|-----|---|-------------------|------------|-----------------|-------------------|--------|---|----------------------------|----|
| Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By- Candidate/Officeholder/Political Credit Card Payment | | | Fees Office Overhead/Rental Expense Ti Food/Beverage Expense Polling Expense Ti de By - Gift/Awards/Memorials Expense Printing Expense Ti | | | | | | Travel in District Travel Out of Dis | quipment & Related Expense | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | | 3 | Filer ID | (Ethics Commission Filers | 5) |
| | Sch: 37/41 Rpt: | | Talarico, James (The Honor | able) | | | | | 00081913 | | |
| 4 | Date | 5 | Payee name | | | | | | | | |
| | 05/13/2025 | | Uber Eats | | | | | | | | |
| 6 | Amount (\$) | 7 | 7 Payee address; City; State; Zip Code | | | | | | | | |
| | \$89.70 | | 1725 3rd St | | | | | | | | |
| | | | | | | | | | | | |
| | | | San Francisco, CA 94158 | | | | | | | | |
| 8 | PURPOSE | (a) | Category (See Categories listed at the | e top of this sch | edule) | (b) Des | cription | | | | |
| | OF EXPENDITURE | | Food/Beverage Expense | | , | | Check if travel c | outsic | de of Texas. Com | plete Schedule T. | |
| | EXPENDITORE | | | | | | | TX, | officeholder living | expense | |
| | | | | | | Foo | bd | | | | |
| | | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | С | Office sou | ht | | | Office he | eld | |
| | Date | | Payee name | | | | | | | | |
| | 06/02/2025 | | Uber Eats | | | | | | | | |
| | Amount (\$) | ┢ | Payee address; City; | State: | Zip Co | le | | | | | |
| | \$125.55 | | 1725 3rd St | , | | | | | | | |
| | φ120.00 | | 1725 514 51 | | | | | | | | |
| | | | San Francisco, CA 94158 | | | | | | | | |
| | PURPOSE | (a) | Category (See Categories listed at the | e top of this sch | edule) | (b) Des | cription | | | | |
| | OF EXPENDITURE | | Food/Beverage Expense | | | | | | de of Texas. Com | | |
| | | | | | | | | TX, | officeholder living | expense | |
| | | | | | | Foo | a | | | | |
| | | | | | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | C | Office sou | ht | | | Office he | ld | |
| | | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | |
| | 06/03/2025 | | Uber Eats | | | | | | | | |
| | Amount (\$) | | Payee address; City; | State; | Zip Co | le | | | | | |
| | \$152.23 | | 1725 3rd St | | | | | | | | |
| | | | | | | | | | | | |
| | | | San Francisco, CA 94158 | | | | | | | | |
| | PURPOSE | (a) | Category (See Categories listed at the | e top of this sch | edule) | (b) Des | cription | | | | |
| | OF EXPENDITURE | | Food/Beverage Expense | | | | Check if travel c | outsic | de of Texas. Com | plete Schedule T. | |
| | EXPENDITORE | | | | | | | TX, | officeholder living | expense | |
| | | | | | | Foo | bd | | | | |
| | | | | | | | | | | | |
| | Complete ONLY if direct | | Candidate/Officeholder name | C | Office sou | ht | | | Office he | eld | |
| | expenditure to benefit C/OI | Н | | | | | | | | | |
| | | | | | | | | | | | |
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| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | |
|---|---|--|--|----------------------------|------------|-----|---|---|----------------------------|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | Fees Office Overhead/Rental Expense Tr Food/Beverage Expense Polling Expense Tr By - Gift/Awards/Memorials Expense Printing Expense Tr | | | | | | Travel in District Travel Out of Dis | quipment & Related Expense |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | 3 | Filer ID | (Ethics Commission Filers) |
| | Sch: 38/41 Rpt: | | Talarico, James (The I | Honorable) | | | | 00081913 | · · · · |
| 4 | Date 06/04/2025 | | Payee name Uber Eats | | | | | | |
| 6 | Amount (\$) \$123.44 | | Payee address; City; 1725 3rd St San Francisco, CA 94: | | ; Zip Co | de | | | |
| 8 | PURPOSE OF EXPENDITURE | OF Eood/Beverage Expense | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | andidate/Officeholder na | me C | Office sou | ght | | Office he | ld |
| | Date | | Payee name | | | | | | |
| | 04/25/2025 | | United | | | | | | |
| | Amount (\$) \$40.99 | | Payee address; City; 233 S. Wacker Drive Chicago, IL 60606 | State; | ; Zip Co | de | | | |
| | PURPOSE OF EXPENDITURE | | Category (See Categories lis Travel Out of District | ted at the top of this sch | edule) | | | ide of Texas. Comp , officeholder living | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | andidate/Officeholder na | ne C | Office sou | ght | | Office he | łd |
| | Date | | Payee name | | | | | | |
| | 04/25/2025 | | United | | | | | | |
| | Amount (\$) \$617.81 | | Payee address; City; 233 S. Wacker Drive | State; | ; Zip Co | de | | | |
| | | | Chicago, IL 60606 | | | | | | |
| | PURPOSE OF EXPENDITURE | | Category (See Categories lis Travel Out of District | ted at the top of this sch | edule) | | | ide of Texas. Comp , officeholder living | |
| | Complete ONLY if direct expenditure to benefit C/OF | | andidate/Officeholder na | me C | Office sou | ght | | Office he | ld |
| | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | |
|---|---|---|---|--|--|--|--|--|--|--|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Offit/Awards/Memorials Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above) | | | | | | | |
| 1 | Total pages Schedule F1: | · · · · · · | 3 Filer ID (Ethics Commission Filers) | | | | | | | |
| - | Sch: 39/41 Rpt: | Talarico, James (The Honorable) | 00081913 | | | | | | | |
| 4 | Date 02/27/2025 | Payee name Walgreens | | | | | | | | |
| 6 | Amount (\$) \$6.27 | 7 Payee address; City; State; Zip Code 7 1920 E Riverside Dr Austin, TX 78741 | | | | | | | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) (b) Description Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Supplies | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held | | | | | | | |
| | Date | Payee name | | | | | | | | |
| | 03/03/2025 | Warwick Melrose - Dallas | | | | | | | | |
| | Amount (\$) \$12.98 | Payee address; City; State; Zip Code 3015 Oak Lawn Ave Dallas, TX 75219 | | | | | | | | |
| | PURPOSE OF EXPENDITURE | | utside of Texas. Complete Schedule T. TX, officeholder living expense | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held | | | | | | | |
| | Date | Payee name | | | | | | | | |
| | 02/03/2025 | Willis, Debbra | | | | | | | | |
| | Amount (\$) \$600.00 | Payee address; City; State; Zip Code 1335 Vinewood Drive | | | | | | | | |
| | | Mansfield, TX 76063 | | | | | | | | |
| | PURPOSE OF EXPENDITURE | | utside of Texas. Complete Schedule T. TX, officeholder living expense | | | | | | | |
| | Complete ONLY if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sought | Office held | | | | | | | |
| | | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | |
|---|---|----------|--|---|---------------------|---|---|-------|---|----------------------------|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | nmittee | Event Expense Fees Food/Beverage Expe Gift/Awards/Memoria Legal Services The Instruction C | nse Is Expense | Loan Repa Office Ove Polling Exp Printing Ex Salaries/W | yment/Reimbursement rhead/Rental Expense ense pense ages/Contract Labor | | Travel in District Travel Out of Dis | quipment & Related Expense |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | | 3 | Filer ID | (Ethics Commission Filers) |
| | Sch: 40/41 Rpt: | | Talarico, Ja | mes (The Hon | orable) | | | | 00081913 | |
| 4 | Date | 5 | Payee name | | | | | I | | |
| | 03/10/2025 | | Willis, Debb | ora | | | | | | |
| 6 | Amount (\$) | 7 | 7 Payee address; City; State; Zip Code | | | | | | | |
| | \$200.00 | | 1335 Vinewood Drive | | | | | | | |
| | | | | | | | | | | |
| | | | Mansfield, 7 | FX 76063 | | | | | | |
| 8 | PURPOSE | (a) | Category (Se | ee Categories listed at | the top of this sch | nedule) | (b) Description | | | |
| | OF EXPENDITURE | | | ages/Contract I | | , | | outsi | de of Texas. Com | plete Schedule T. |
| | | | | | | | | , TX, | officeholder living | expense |
| | | | | | | | Payroll | | | |
| 9 | Complete ONLY if direct | | Candidato/Offi | ceholder name | | Office soug | sht | | Office he | ld |
| 9 | expenditure to benefit C/OI | | Januluale/Olli | | | Jince sou | jin. | | Onice he | 20 |
| | Date | | Payee name | | | | | | | |
| | 04/01/2025 | | Willis, Debb | ora | | | | | | |
| | Amount (\$) | | Payee addre | ss; City; | State | ; Zip Co | de | | | |
| | \$200.00 1335 Vinewood Drive | | | | | | | | | |
| | | | Mansfield, 7 | FX 76063 | | | | | | |
| | PURPOSE OF EXPENDITURE | (a) | | ee Categories listed at ages/Contract I | | nedule) | | | de of Texas. Com , officeholder living | |
| | | | | | | | | | | |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Offi | ceholder name | (| Office sou | jht | | Office he | eld |
| | Date | | Payee name | | | | | | | |
| | 05/01/2025 | | Willis, Debb | ora | | | | | | |
| | Amount (\$) | | Payee addres | | Stato | ; Zip Co | do | | | |
| | \$200.00 | | 1335 Vinew | | Siale | , zip coi | ue | | | |
| | φ200.00 | | 1000 11100 | | | | | | | |
| | | | Mansfield, 7 | FX 76063 | | | | | | |
| | PURPOSE OF | (a) | | ee Categories listed at | | nedule) | (b) Description | | | |
| | EXPENDITURE | | Salaries/Wa | ages/Contract I | _abor | | | | de of Texas. Com , officeholder living | |
| - | Complete ONLY if direct | <u>_</u> | Candidate/Offi | ceholder name | (| Office sou | aht | | Office he | ld |
| | expenditure to benefit C/Oł | | | | | 2.1100 0000 | g | | | |
| - | | | | | | | | | | |
| | | | | | | | | | | |

| | EXPENDITURE CATEGORIES FOR BOX 8(a) | | | | | | | | | |
|--|--|-----|--|---------------------|--|--|-------|---|---------------------------------------|--|
| Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment | | | Event Expense Fees Food/Beverage Exper Gift/Awards/Memorial | ise s Expense | Loan Repa Office Over Polling Exp Printing Ex Salaries/W | yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor | | Travel in District Travel Out of Dis | quipment & Related Expense | |
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | 3 | Filer ID | (Ethics Commission Filers) | |
| _ | Sch: 41/41 Rpt: | | Talarico, James (The Hono | orable) | | | | 00081913 | · · · · · · · · · · · · · · · · · · · | |
| 4 | Date | 5 | Payee name | | | | | | | |
| | 05/30/2025 | | Willis, Debbra | | | | | | | |
| 6 | Amount (\$) | 7 | Payee address; City; | State; | ; Zip Coo | le | | | | |
| | \$200.00 | | 1335 Vinewood Drive | | | | | | | |
| | | | | | | | | | | |
| | | | Mansfield, TX 76063 | | | | | | | |
| 8 | PURPOSE | (a) | Category (See Categories listed at | the top of this sch | edule) | (b) Description | | | | |
| | OF EXPENDITURE | | Salaries/Wages/Contract L | | | Check if travel | outsi | ide of Texas. Com | plete Schedule T. | |
| | | | | | | | , TX | , officeholder living | expense | |
| | | | | | | Payroll | | | | |
| | | | | | | | | | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OF | | Candidate/Officeholder name | C | Office sou | Jht | | Office he | eld | |
| | Date | | Payee name | | | | | | | |
| | 01/23/2025 | | Wix | | | | | | | |
| | Amount (\$) | - | Payee address; City; | State | ; Zip Co | 10 | | | | |
| | ., | | | | , zip 000 | | | | | |
| | \$369.75 500 Terry A Francois Boulevard | | | | | | | | | |
| | | | Sixth Floor | | | | | | | |
| | | | San Francisco, CA 94158 | | | | | | | |
| | PURPOSE | (a) | Category (See Categories listed at | the top of this sch | iedule) | (b) Description | | | | |
| | OF EXPENDITURE | | Advertising Expense | | | Check if travel | outsi | ide of Texas. Com | plete Schedule T. | |
| | EXPENDITORE | | | | | | | , officeholder living | expense | |
| | | | | | | Website Hos | ting | J | | |
| | | | | | | | | | | |
| | Complete ONLY if direct | | Candidate/Officeholder name | C | Office sou | Jht | | Office he | eld | |
| | expenditure to benefit C/OI | Н | | | | | | | | |
| - | Date | Γ | Payee name | | | | | | | |
| | 05/16/2025 | | Worley LLC | | | | | | | |
| _ | | - | - | 01-1 | . 7 | | | | | |
| | Amount (\$) | | Payee address; City; | | ; Zip Coo | le | | | | |
| | \$643.30 | | 3217 N Interstate 35 Front | age Rd | | | | | | |
| | | | | | | | | | | |
| | | | Austin, TX 78722 | | | | | | | |
| | PURPOSE | (a) | Category (See Categories listed at | the top of this sch | iedule) | (b) Description | | | | |
| | | | Office Overhead/Rental Ex | | | Check if travel | outsi | ide of Texas. Com | plete Schedule T. | |
| | EXPENDITURE | | | | | | , TX | , officeholder living | expense | |
| | | | | | | Stationary | | | | |
| | | | | | | | | | | |
| | Complete ONLY if direct | | Candidate/Officeholder name | C | Office sou | Jht | | Office he | eld | |
| | expenditure to benefit C/OI | Н | | | | | | | | |
| - | | | | | | | | | | |
| | | | | | | | | | | |