## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to complete this	form. 1 Filer ID (Ethics Commis 00083642		2 Total pages filed: 77
3 CANDIDATE /	MS / MRS / MR FIRST		MI	OFFICE USE ONLY
OFFICEHOLDER NAME	The Honorable Carrie	)		Date Received
10.00				ELECTRONICALLY FILED
	NICKNAME LAST		SUFFIX	07/16/2025
	Isaac			
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE	#; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER MAILING	100 Commons Rd. #7-125			
ADDRESS				Receipt # Amount
Change of Address	Dripping Springs , TX 78620			
	Dripping Springs , 17, 70020			Date Processed
				Date Imaged
5 CAMPAIGN TREASURER	MS / MRS / MR FIRST		MI	
NAME	Mr. Jason			
	NICKNAME LAST		SUFFIX	
	Isaac			
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PI	LEASE); APT	/ SUITE#; CITY;	STATE; ZIP CODE
TREASURER	100 Commons Rd #7-125			
ADDRESS				
(Residence or Business)	Dripping Springs , TX 78620			
	Dripping Springs , 1× 78020			
7 CAMPAIGN	AREA CODE PHONE NUM	BER EXTENSION		
TREASURER	(512) 850-5524			
PHONE				
8 REPORT				
TYPE	January 15 30th	day before election	Runoff	15th day after campaign treasurer
				appointment (officeholder only)
	X July 15 8th c	lay before election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year		Month Day	Year
COVERED	01/01/2025	THROUGH	06/30/2025	5
10 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month Day Year	X Primary	Runoff	Other
	03/03/2026	General	Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT	(if known)
III OFFICE	State Representative District 73		State Representa	
	State Representative District 75		State Represente	tive District 75
		GO TO PAGE 2		

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 77

13 C / OH NAME	Isaac, Carrie (The Ho	norable)	<b>14</b> Filer ID (100083642	Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without I officeholders are required to report this information	the candidate's or office	holder's knowledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
ш°	GENERAL						
		COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00			
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	<b>\$</b> 13,465.91			
EXPENDITURE TOTALS							
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 84,445.63			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	<b>\$</b> 122,126.30			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00			
<b>17</b> AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.					
		The Ho	norable Carrie Isaac				
		Signature of	Candidate or Officeholo	der			
AFFIX NO	TARY STAMP / SEAL ABO	DVE					
Sworn to and subs	cribed before me, by the s	aid	, this the	day			
of	, 20, to ce	ertify which, witness my hand and seal of office.					
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath			

### **SUBTOTALS - C/OH**

### FORM C/OH **COVER SHEET PG 3**

				3 of 77
18 FILER NAME Isaac, Carrie	e (The Honorable)	<b>19</b> Filer ID 00083642	(Ethics Commiss	sion Filers)
20 SCHEDULE S			SUBTOTAL	_ AMOUNT
1. X S	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	13,262.58
2. X S	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	203.33
3. S	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4. S	SCHEDULE E: LOANS		\$	
5. X S	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	82,973.77
6. X S	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	1,381.14
7. S	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8. S	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9. X S	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	90.72
10. S	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11. S	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	201.18

	MONEI	ARY POLITICAL C	ONTRIBUTION	15		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 1/11 Rpt: 4/77	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
		(The Honorable)				00083642	
4	Date 06/29/2025	<ul><li>5 Full name of contributor Adams, Debbie</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: tte; Zip Code	)	7	Amount of Contribution (\$)	\$1,068.91
		Wimberley, TX 78676					
8	Principal occu Owner	pation / Job title (See Instructions)	9	Employer (See Instructions Cielito Lindo Ranch	5)		
	Date	Full name of contributor	7	Cicito Endo Ivanon	_	Amount of Contribution (\$\Psi\$)	
	06/25/2025	Alexander, Stephen  Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$71.21
	Deinsinal case	Austin, TX 78737		Franks or (Cook Instructions			
	Principal occupation / Job title (See Instructions)  President			Employer (See Instructions Clover Acquisition Corp		tion	
	Date	Full name of contributor	out-of-state PAC (ID#:	Clover / tequicition Corp.	<u> </u>	Amount of Contribution (\$)	
	06/25/2025	Anderson, Barbara	Out-of-state FAC (ID#			Amount of Continuation (4)	\$41.03
		Contributor address; City; Sta	ıte; Zip Code				
		Baytown, TX 77521					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	s)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/22/2025	Asbury, Debbie G  Contributor address; City; Sta	ite; Zip Code				\$500.00
		Canyon Lake, TX 78133					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/28/2025	Asbury, Debbie G					\$500.00
		Contributor address; City; Sta Canyon Lake, TX 78133	ıte; Zip Code				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>.                                    </u>		
	Retired			Retired			
			·				

	MONET	ARY POLITICAL CONTRIBUTION	ΟN	IS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this t	for	m.	1	Total pages Schedule A1: Sch: 2/11 Rpt: 5/77	
2	FILER NAME Isaac, Carrie	(The Honorable)			3	Filer ID (Ethics Commission 00083642	ı Filers)
4	Date 06/29/2025	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$104.10
_	D: : 1	Austin, TX 78737	1_	5 1 (0 1 1 1	_		
8	Real Estate	pation / Job title (See Instructions)	9	Employer (See Instructions Self	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Baugh, Joseph Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$50.00
	Principal occu	Wimberley, TX 78676 pation / Job title (See Instructions)	I	Employer (See Instructions	 s)		
	retired			retired			
	Date 06/29/2025	Full name of contributor out-of-state PAC (ID#:_ Bear, Harvey  Contributor address; City; State; Zip Code	•••••		•	Amount of Contribution (\$)	\$260.25
		Houston, TX 77041					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
	Date 06/24/2025	Full name of contributor out-of-state PAC (ID#: Beck, Robert  Contributor address; City; State; Zip Code  Wimberley, TX 78676		)		Amount of Contribution (\$)	\$57.04
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 06/24/2025	Full name of contributor out-of-state PAC (ID#: Breitung, Glenn  Contributor address; City; State; Zip Code  New Braunfels, TX 78123			•	Amount of Contribution (\$)	\$57.04
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION	ΟN	IS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this t	for	m.	1	Total pages Schedule A1: Sch: 3/11 Rpt: 6/77	
2	FILER NAME Isaac, Carrie	(The Honorable)			3	Filer ID (Ethics Commission 00083642	n Filers)
4	Date 06/24/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Brewer, John</li> <li>Contributor address; City; State; Zip Code</li> </ul>			7	Amount of Contribution (\$)	\$100.00
•	Principal occu	New Braunfels, TX 78132	l <sub>a</sub>	Employor (Soo Instructions	<u>''</u>		
8	retired	pation / Job title (See Instructions)	9	Employer (See Instructions retired	»)		
	Date 06/29/2025	Full name of contributor out-of-state PAC (ID#:_Buckingham, John  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$100.00
	Dringing aggr	Austin, TX 78620		Employer (Coo Instructions	<u></u>		
	Sales	pation / Job title (See Instructions)		Employer (See Instructions Casper's Ice Cream	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_Buckley, Linda  Contributor address; City; State; Zip Code		)	•	Amount of Contribution (\$)	\$51.03
		Wimberley, TX 78676					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_Busbey, Charles  Contributor address; City; State; Zip Code  Dripping Springs, TX 78620		)		Amount of Contribution (\$)	\$25.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
	Date 06/29/2025	Full name of contributor out-of-state PAC (ID#: Byrd, Clifton Contributor address; City; State; Zip Code Dripping Springs, TX 78620			•	Amount of Contribution (\$)	\$25.02
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		

	MONET	ARY POLITICAL CONTRIE	BUTION	IS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complet	te this for	n.	1	Total pages Schedule A1: Sch: 4/11 Rpt: 7/77	
2	FILER NAME Isaac, Carrie	(The Honorable)			3	Filer ID (Ethics Commission 00083642	n Filers)
4	Date 06/30/2025	<ul> <li>Full name of contributor  out-of-state out-of-state</li> <li>Canine, Chadwick</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$71.21
_		Wimberley, TX 78676					
8	Principal occu Consultant	pation / Job title (See Instructions)	9	Employer (See Instructions JOOY Consulting	5)		
	Date 06/30/2025	Full name of contributor out-of-state Carriker, Terri  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$52.05
	Principal occu	Austin, TX 78737 pation / Job title (See Instructions)	1	Employer (See Instructions	·/		
	LPC	pation / Job title (See Instituctions)		Self	) )		
	Date 06/30/2025	Full name of contributor out-of-state Cattan, Joseph Contributor address; City; State; Zip Code	PAC (ID#:	)		Amount of Contribution (\$)	\$100.00
		Bulverde, TX 78163					
	Principal occu Senior Tax F	pation / Job title (See Instructions) Professional		Employer (See Instructions The Fox Alliance	s)		
	Date 06/30/2025	Full name of contributor out-of-state Colvin, Todd  Contributor address; City; State; Zip Code  Dripping Springs, TX 78620				Amount of Contribution (\$)	\$57.04
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>                                      </u>		
	Date 06/24/2025	Full name of contributor out-of-state Crenshaw, Joel Contributor address; City; State; Zip Code Fort Worth, TX 76108		)		Amount of Contribution (\$)	\$25.02
	Principal occu Managing Pa	pation / Job title (See Instructions) artner		Employer (See Instructions RareIntellect LLC	5)		
			1				

	MONET	ARY POLITICAL CONTRIBUTION	N	IS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 5/11 Rpt: 8/77	
2	FILER NAME Isaac, Carrie	(The Honorable)			3	Filer ID (Ethics Commission 00083642	ı Filers)
4	Date 06/29/2025	<ul> <li>5 Full name of contributor  out-of-state PAC (ID#:_Culver, Janet</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$520.51
8	Dringinal occu	Dripping Springs, TX 78620 pation / Job title (See Instructions)	a	Employer (See Instructions	·/		
0	retired	oalion7 Job title (See instructions)	9	retired	»)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Curley, Tiffany Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$100.00
	Principal occu	New Braunfels, TX 78130 pation / Job title (See Instructions)		Employer (See Instructions	·/		
	Chiropractor	Jalion / Job title (See Instructions)		Curley Chiropractic	·)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Cusack, Mark Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$104.10
		Wimberley, TX 78676					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
	Date 06/24/2025	Full name of contributor out-of-state PAC (ID#:_ Freeman, Kevin D  Contributor address; City; State; Zip Code  Keller, TX 76248				Amount of Contribution (\$)	\$500.00
	Principal occu Author	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 06/24/2025	Full name of contributor out-of-state PAC (ID#:_ Graham, David Contributor address; City; State; Zip Code  Dripping Springs, TX 78620				Amount of Contribution (\$)	\$28.52
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<b>s</b> )		

	MONET	ARY POLITICAL CONTRIBUT	TION	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete thi	is for	m.	1	Total pages Schedule A1: Sch: 6/11 Rpt: 9/77	
2	FILER NAME Isaac, Carrie	(The Honorable)			3	Filer ID (Ethics Commission 00083642	n Filers)
4	Date 06/27/2025	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$28.52
8	Principal occu	Austin, TX 78724 pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Caregiver	,		Carefor			
	Date 06/27/2025	Full name of contributor  out-of-state PAC (I Highfield, Albert Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$171.12
		Canyon Lake, TX 78133					
	Principal occur retired	pation / Job title (See Instructions)		Employer (See Instructions retired	s)		
	Date 06/29/2025	Full name of contributor out-of-state PAC (I Hingst, Harry Contributor address; City; State; Zip Code	D#:			Amount of Contribution (\$)	\$208.20
		Canyon Lake, TX 78133					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (I Hopkins, Kim  Contributor address; City; State; Zip Code  Wimberley, TX 78676		)		Amount of Contribution (\$)	\$71.21
		pation / Job title (See Instructions) ector Client Solutions		Employer (See Instructions CBRE	5)		
	Date 06/29/2025	Full name of contributor out-of-state PAC (I Johnson, Don Contributor address; City; State; Zip Code Canyon Lake, TX 78133		)	•	Amount of Contribution (\$)	\$104.10
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	s)		

	MONET	ARY POLITICAL CONTRIBUTION	NC	IS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 7/11 Rpt: 10/77	
2	FILER NAME Isaac, Carrie	(The Honorable)			3	Filer ID (Ethics Commission 00083642	Filers)
4	Date 06/29/2025	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$208.20
_		Buda, TX 78610	1_				
8	Principal occu retired	pation / Job title (See Instructions)	9	Employer (See Instructions retired	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Mader, Thom Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$26.03
	Principal occu	Wimberley, TX 78676 pation / Job title (See Instructions)	Γ	Employer (See Instructions	<u> </u> s)		
	retired	,		retired	,		
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#:_ McGrath, James Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$12.51
		Dripping Springs, TX 78620					
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions Financial Management		oup, LLC	
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#:_Moak Casey PAC  Contributor address; City; State; Zip Code  Austin, TX 78701				Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_Parish, Russell  Contributor address; City; State; Zip Code  Austin, TX 78749				Amount of Contribution (\$)	\$25.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	s)		
			-				

	MONET	ARY POLITICAL CONTRIBUTION	N	IS		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 8/11 Rpt: 11/77	
2	FILER NAME Isaac, Carrie	(The Honorable)			3	Filer ID (Ethics Commission 00083642	Filers)
4	Date 06/30/2025	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$52.05
8	Dringinal occu	New Braunfels, TX 78130 pation / Job title (See Instructions)	0	Employer (See Instructions	<u>''</u>		
0	Chiropractor	pation / Job title (See Instructions)	9	Self	·)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Ply, Wesley Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$52.05
		San Marcos, TX 78666					
	Principal occu Chiropractor	pation / Job title (See Instructions)		Employer (See Instructions Ply Family Wellness	s)		
	Date 06/29/2025	Full name of contributor out-of-state PAC (ID#:_Randle, Silas  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$57.04
		Austin, TX 78736					
	Principal occu IT Manager	pation / Job title (See Instructions)		Employer (See Instructions LCRA	s)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_Rose, Korey  Contributor address; City; State; Zip Code  New Braunfels, TX 78132		)		Amount of Contribution (\$)	\$260.25
	Principal occu Chiropractor	pation / Job title (See Instructions)		Employer (See Instructions Rose Family Chiropract		Vellness Center LLC	
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_Sjolseth, Brian  Contributor address; City; State; Zip Code  Dripping Springs, TX 78620				Amount of Contribution (\$)	\$125.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		

	MONET	ARY POLITICAL CONTRIBUTION	N	IS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 9/11 Rpt: 12/77	
2	FILER NAME Isaac, Carrie	(The Honorable)			3	Filer ID (Ethics Commission 00083642	on Filers)
4	Date 06/30/2025	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$25.00
•	Dringing Loggy	Dripping Springs, TX 78620	٦	Employer (See Instruction	<u></u>		
8	retired	pation / Job title (See Instructions)	9	Employer (See Instructions retired	5)		
	Date 06/24/2025	Full name of contributor out-of-state PAC (ID#:_ Sorensen, Brian Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$83.72
	Dringing agg	Austin, TX 78737	_	Employer (See Instructions	<u></u>		
	Provisioning	pation / Job title (See Instructions) Agent		Southwest Airlines	·)		
	Date 06/27/2025	Full name of contributor out-of-state PAC (ID#:_ Storm, Josh Contributor address; City; State; Zip Code		)	•	Amount of Contribution (\$)	\$71.21
		Dripping Springs, TX 78620					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/30/2025	Full name of contributor out-of-state PAC (ID#:_ Tahuahua, Geoffrey  Contributor address; City; State; Zip Code  Dripping Springs TX, TX 78620				Amount of Contribution (\$)	\$535.38
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>I</u> S)		
	Date 06/25/2025	Full name of contributor out-of-state PAC (ID#:_ Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code  Austin, TX 78701		)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIB		SCHEDULE A1			
	The Instruc	ction Guide explains how to complete	e this for	m.	1	Total pages Schedule A1: Sch: 10/11 Rpt: 13/77	
2	FILER NAME Isaac, Carrie	(The Honorable)			3	Filer ID (Ethics Commission 00083642	on Filers)
4	Date 06/24/2025	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$12.51
0	Dringing! goog	New Braunfels, TX 78130	lo.	Employer (See Instructions	<u></u>		
8	Administrativ	pation / Job title (See Instructions) re Assistant	Employer (See Instructions Heldenfels Enterprises,		<b>:</b> .		
	Date  Full name of contributor out-of-state PAC (ID#:)  Tkhinvaleli, Maya  Contributor address; City; State; Zip Code  Dripping Springs, TX 78620					Amount of Contribution (\$)	\$1,041.02
		pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Registered N			Maxim Health Care	_		
	Date 06/30/2025	Full name of contributor out-of-state P. Tkhinvaleli, Maya  Contributor address; City; State; Zip Code	AC (ID#:	)		Amount of Contribution (\$)	\$57.04
	Principal occur	Dripping Springs, TX 78620 pation / Job title (See Instructions)	1	Employer (See Instructions	;) 		
	Registered N			Maxim Home Healthcar			
	Date 06/29/2025	Full name of contributor out-of-state P. Trial, Shelby  Contributor address; City; State; Zip Code  San Antonio, TX 78266	,	)		Amount of Contribution (\$)	\$26.03
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)		
	Date 06/29/2025	Full name of contributor out-of-state P. White, Stephen Contributor address; City; State; Zip Code Garden Ridge, TX 78266		)		Amount of Contribution (\$)	\$15.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	s)		
			•				

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 11/11 Rpt: 14/77
2	FILER NAME Isaac, Carrie (The Honorable)	3 Filer ID (Ethics Commission Filers) 00083642
4		7 Amount of Contribution (\$) \$104.
	Bellville, TX 77418	
8	Principal occupation / Job title (See Instructions)  retired  9 Employer (See Instructions)  retired	ctions)
	Date Full name of contributor out-of-state PAC (ID#:	Amount of Contribution (\$) \$71.
	Dripping Springs, TX 78620	
	Principal occupation / Job title (See Instructions)  General Counsel  Employer (See Instructions)  One Tree Planted	ctions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Scl Sch: 1/1 Rpt:				
2 FILER NAME Isaac, Carri	: e (The Honorable)		3 Filer ID (Ethic 00083642	es Commission Filers)			
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$				
5 Date 04/08/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:</li></ul>		contribution (\$) \$90.00	staff event registration fee			
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T.  ON-JUDICIAL) (See instructions)				
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL)	(See instructions)			
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (	FOR JUDICIAL)			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date 03/18/2025	Full name of contributor out-of-state PAC (ID#: Canyon Lake Republican Women Contributor address; City; State; Zip Code		Amount of contribution (\$) \$30.00	In-kind contribution Contribution Staff training registration fee			
	Canyon Lake, TX 78133		Check if travel of	I I Dutside of Texas. Complete Schedule T.			
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See in	nstructions)			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	(See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (	FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date 06/30/2025	Full name of contributor out-of-state PAC (ID#: Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code			In-kind contribution description campaign fundraiser location			
Principal occi	Austin, TX 78701  upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON		Dutside of Texas. Complete Schedule T. Instructions)			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,				
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	(See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (	FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
			·				

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 1/57 Rpt: 16/77	Isaac, Carrie (The Honorable) 00083642						
4	Date	5 Payee name						
	01/12/2025	AT&T Mobility						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$117.04	PO Box 6416						
		Carol Stream, IL 60197						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense						
		campaign mobile phone/data service for December						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O	1						
	Date	Payee name						
	01/12/2025	AT&T Mobility						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$154.65	PO Box 6416						
		Carol Stream, IL 60197						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description						
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense						
		campaign mobile phone/data service for January						
		2025						
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held						
	experiordine to benefit C/Oi	1						
	Date	Payee name						
	02/01/2025	AT&T Mobility						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$94.49	PO Box 6416						
		Carol Stream, IL 60197						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Pental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.						
EXPENDITURE		Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense						
		campaign mobile phone/data service for February						
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
	experientare to benefit 6/01	<u> </u>						

### SCHEDULE F1

The straining Expense Event Expense Event Expense Loan Repayment/Reimbur Community Com

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 2/57 Rpt: 17/77	Isaac, Carrie (The Honorable) 00083642					
4	Date	5 Payee name					
	03/08/2025	AT&T Mobility					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$94.55	PO Box 6416					
		Carol Stream, IL 60197					
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense					
		campaign mobile phone/data service for March					
		campaign mostic priority data convict for majori					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	1					
	Date	Payee name					
	05/03/2025	AT&T Mobility					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$94.57	PO Box 6416					
		Carol Stream, IL 60197					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense					
		campaign mobile phone/data service for April					
		campaign mostic priority data convict for 7 pm					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						
	Date	Payee name					
	06/04/2025	AT&T Mobility					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$94.57	PO Box 6416					
		Carol Stream, IL 60197					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense  campaign mobile phone/data service for May					
		campaign mobile phone/data service for May					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
g Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)							
		The Instruction Guide explains how to complete this form.	_						
1	Total pages Schedule F1: Sch: 3/57 Rpt: 18/77	2 FILER NAME Saac, Carrie (The Honorable) 3 Filer ID (Ethics Commission Filers) 00083642							
_	<u> </u>	<u> </u>	_						
4	Date	5 Payee name							
	05/29/2025	Academy							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$162.35	5400 Brodie Lane							
		Support Vallay, TV 7074F							
		Sunset Valley, TX 78745							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Gift/Awards/Memorials Expense							
		Check if Austin, TX, officeholder living expense							
		Capitol staff gift							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI	1							
	Date	Payee name							
	03/12/2025	Access Valet Parking							
	Amount (\$)	Payee address; City; State; Zip Code	_						
	\$17.00	14910 Hartsmith Dr							
	<del>+</del> =								
		Austin, TX 78725							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.							
	2/11/2/11/0/12	Check if Austin, TX, officeholder living expense							
		Officeholder parking fee at Capitol Grill for Texas House Republican Caucus event							
		House Republican Caucus evenit							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								
	Date	Payee name							
	05/29/2025	Access Valet Parking							
	Amount (\$)	Payee address; City; State; Zip Code	_						
	\$16.00	14910 Hartsmith Dr							
	420.00								
		Austin, TX 78725							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.							
	LXI LINDITORL	Check if Austin, TX, officeholder living expense							
		Officeholder parking for Legislative caucus dinner							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI	1							

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politi Credit Card Payment	cal Committee Legal Services Salaries/wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1	: 2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/57 Rpt: 19/77	Isaac, Carrie (The Honorable) 00083642
4 Date	5 Payee name
01/09/2025	Amazon
6 Amount (\$) \$20.56	
	Seattle, WA 98108
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  Capitol office supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate/Officeholder name Office sought Office held OH
Date	Payee name
01/17/2025	Amazon
Amount (\$) \$56.26	Payee address; City; State; Zip Code PO Box 81226
	Seattle, WA 98108
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  Capitol office supplies
Complete ONLY if direct expenditure to benefit C/	Candidate/Officeholder name Office sought Office held OH
Date	Payee name
01/17/2025	Amazon
Amount (\$) \$82.24	Payee address; City; State; Zip Code PO Box 81226
	Seattle, WA 98108
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  Capitol office supplies
Complete ONLY if direct expenditure to benefit C/	Candidate/Officeholder name Office sought Office held OH

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 5/57 Rpt: 20/77	Isaac, Carrie (The Honorable) 00083642						
4	Date	5 Payee name						
	01/10/2025	Amazon						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$70.35	PO Box 81226						
		Seattle, WA 98108						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.						
		Capitol Office supplies						
		Capitol Office supplies						
_	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold						
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H						
L								
	Date	Payee name						
	03/18/2025	Amazon						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$26.61	PO Box 81226						
		Seattle, WA 98108						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.						
		Capitol Office supplies						
		Capitol Office supplies						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·						
_	Data							
	Date	Payee name						
	04/21/2025	Amazon						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$27.27	PO Box 81226						
		Seattle, WA 98108						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense  MacBook charger for campaign staff						
		iviacbook charger for campaign stail						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O							

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 6/57 Rpt: 21/77	Isaac, Carrie (The Honorable)	00083642
4	Date	5 Payee name	•
	05/08/2025	Amazon	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$80.96	PO Box 81226	
		Seattle, WA 98108	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	·	Check if Austin, TX, officeholder living expense
			Capitol office supplies
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/30/2025	Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$81.18	PO Box 81226	
		Seattle, WA 98108	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense  Capitol staff gift
			Suprior stain gift
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	•	
-	Date	Payee name	
	06/18/2025	Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$46.19	PO Box 81226	
	Ψ10.10	1 0 20002220	
		Seattle, WA 98108	
	PURPOSE		N. Donastination
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overflead/Reflial Expense	Check if Austin, TX, officeholder living expense
			campaign office supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol	1	

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 7/57 Rpt: 22/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	06/26/2025	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$49.78	PO Box 81226
		Seattle, WA 98108
8	PURPOSE	
0	OF	(a) Category (See Categories listed at the top of this schedule)  Solicitation/Fundraising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		supplies for fundraiser
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/27/2025	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$228.98	PO Box 81226
	Ψ220.90	FO BOX 01220
		0
		Seattle, WA 98108
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		supplies for fundraiser
		Coppine to terraries.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	Para and a second
	Date 05/28/2025	Payee name American Legislative Exchange Conference (ALEC)
	Amount (\$)	Payee address; City; State; Zip Code
	\$825.00	2733 Crystal Drive Suite 1000
		Arlington, VA 22202
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Officehold registration for conference
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit 6/01	·

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Serv	Legal Services Salaries/Wages/Contract Labor OTHER (ent				category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME	RNAME		3 Filer ID	(Ethics Commission Filers)		
	Sch: 8/57 Rpt: 23/77	Isaac, Carrie (The I	Honorable)			00083642		
4	Date	5 Payee name						
	02/02/2025	American Legislativ	e Exchange Council	(ALEC)				
6	Amount (\$) \$200.00	<ul><li>7 Payee address; C</li><li>2733 Crystal Drive,</li></ul>	•	Zip Code				
		A. I'						
_	DUDDOGE	Arlington, VA 2220		14.5				
8	PURPOSE OF	(a) Category (See Categori	es listed at the top of this sched	ule) (b)	Description  Check if travel of	utside of Texas. Com	nlete Schedule T	
	EXPENDITURE	Fees			므	TX, officeholder living		
					Officeholder y	early members	ship	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder	name Off	ice sought		Office he	eld	
	Date	Payee name						
	02/07/2025	Apple Barton Creek	(					
	Amount (\$)	Payee address; (	City; State;	Zip Code				
	\$999.00	2901 S. Capital of	Texas Highway					
		•	3 ,					
		Austin, TX 78746						
	PURPOSE OF	(a) Category (See Categori		ule) (b)	Description	(= 0		
	EXPENDITURE	Office Overhead/Re	ental Expense		<b>=</b>	utside of Texas. Comp TX, officeholder living		
					ш	campaign staff		
					•	, 3		
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder	name Off	ice sought		Office he	eld	
	Date	Payee name						
	04/22/2025	Arnold, Elaine						
	Amount (\$)	Payee address; (	City; State;	Zip Code				
	\$175.00	7809 Valburn Dr.		·				
		Austin, TX 78731						
	PURPOSE	(a) Category (See Categori	es listed at the top of this sched	ule) (b)	Description			
	OF EXPENDITURE	Gift/Awards/Memor	ials Expense		ш	utside of Texas. Com		
					ш	TX, officeholder living	expense	
					Capitol staff g	IIIO		
_	Complete ONLY if direct	Candidate/Officeholder	nama Off	ice sought		Office he	ald	
	expenditure to benefit C/O		name On	ice sougril		Office ne	สน	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services Printing Expense Salaries/Wages/Contract Labor				OTHER (enter a category not listed above)					
	Credit Card Payment			The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)	J
	Sch: 9/57 Rpt: 24/77		Isaac, Carrie	e (The Honorab	le)					00083642		
4	4 Date 5 Payee name											
	06/24/2025		Arthur Pfeil	Smart Flowers	nc							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$113.66		803 West As	shby Place								
			San Antonio	, TX 78212								
8	PURPOSE	(a)	Category (Se	e Categories listed at t	ne top of this sche	dule)	(b)	Description				
	OF EXPENDITURE			Memorials Exp		,		=			nplete Schedule T.	
	LAI LINDITORE							_		officeholder livin		
								funeral flower	SI	or constitue	ent	
_	Opening ONLY if allowed	Ļ				<b>(</b> (:	1-4			O#: I-	-1-1	
9	Complete ONLY if direct expenditure to benefit C/OI		Jandidate/Offic	ceholder name	O	ffice sou	gnt			Office h	eld	
_		_										_
	Date		Payee name	L'. 0								
	06/04/2025		Asbury, Deb									
	Amount (\$)		Payee address		State;	Zip Co	de					
	\$500.00		142 Mary Ar	nn Dr								
			Canyon Lak	e, TX 78133								
	PURPOSE	(a)	Category (Se	e Categories listed at t	ne top of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Other					<u></u>		de of Texas. Cor officeholder livin	nplete Schedule T.	
								returned reject				
	Complete ONLY if direct		 Candidate/Offic	ceholder name	O:	ffice sou	ght			Office h	eld	
	expenditure to benefit C/OI					•	•					
-	Date		Payee name									_
	01/09/2025		Bare Bull BE	30 LLC								
	Amount (\$)		Payee addres		State:	Zip Co	de					_
	\$965.59		8545 FM267		Otato,	Z.p 00	uo					
	4000.00											
			Canvon Lak	e, TX 78133								
	PURPOSE	(0)				1	(h)	Description				
	OF	(a)		e Categories listed at t age Expense	ne top of this sche	dule)	(D)	Description Check if travel of	outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		1 OOU/Dever	age Expense						officeholder livin		
								food for const	titu	ents openir	ng day at the Capitol	
	Complete ONLY if direct		Candidate/Offic	ceholder name	0	ffice sou	ght			Office h	eld	
L	expenditure to benefit C/OI	1										

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/57 Rpt: 25/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	04/28/2025	Belomestnov, Thomas
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.00	3204 Peruga Ln
		Round Rock, TX 78681
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		capitol staff travel expenses to Founder's Day event
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	experiulture to beliefit C/O	
	Date	Payee name
	05/29/2025	Belomestnov, Thomas
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	3204 Peruga Ln
	*******	· · · · · · · · · · · · · · · · · ·
		Round Rock, TX 78681
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		campaign staff wages
		Campaign Stail Wages
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
┝	Date	Davisa nama
	01/03/2025	Payee name Berry Communications
	Amount (\$)	Payee address; City; State; Zip Code
	\$15,000.00	1014 W Milton St
		Austin, TX 78704
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Consulting January through December 2024
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Superiorde to belieff 0/01	

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a cate Credit Card Payment  The Instruction Guide explains how to complete this form.	egory not listed above)
1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (EI	thics Commission Filers)
Sch: 11/57 Rpt: 26/77   Isaac, Carrie (The Honorable) 00083642	and commission r nois,
4 Date 5 Payee name	
01/02/2025 Brazos Place Apts	
6 Amount (\$) 7 Payee address; City; State; Zip Code \$2,600.00 800 Brazos St	
\$2,000,00   000 B.ta200 G.t	
Austin, TX 78701	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF Office Overhead/Rental Expense	
X Check if Austin, TX, officenoider living expo	ense
apt rent during session	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Date Payee name	
02/01/2025 Brazos Place Apts	
Amount (\$) Payee address; City; State; Zip Code	
\$2,600.00 800 Brazos St	
Austin, TX 78701	
PURPOSE  (a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Toxas Complete	
EXPENDITURE   Office Overnead/Rental Expense   Literal laver duside di Texas. Complete	
Check if Austin, TX, officeholder living expo	ense
aptient during session	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Date Payee name	
03/03/2025 Brazos Place Apts	
Amount (\$) Payee address; City; State; Zip Code	
\$2,600.00 800 Brazos St	
Austin TV 70701	
Austin, TX 78701	
PURPOSE  (a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Texas Complete	. Cabadula T
OF EXPENDITURE  Office Overhead/Rental Expense  Check if travel outside of Texas. Complete  X Check if Austin, TX, officeholder living expense	
apt rent during session	
l aprilating description	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/57 Rpt: 27/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	04/01/2025	Brazos Place Apts
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,600.00	800 Brazos St
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		X Check if Austin, TX, officeholder living expense
		apt rent during session
_	Commiste ONLY if dispost	Condidate/Officeholder name
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/01/2025	Brazos Place Apts
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,600.00	800 Brazos St
	Ψ2,000.00	000 Biazos St
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	X Check if Austin, TX, officeholder living expense
		apt rent during session
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/02/2025	Brazos Place Apts
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,600.00	800 Brazos St
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		X Check if Austin, TX, officeholder living expense
		apt rent during session
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this f	orm.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 13/57 Rpt: 28/77	Isaac, Carrie (The Honorable)	00083642
4	Date	5 Payee name	•
	01/14/2025	Bulverde Spring Branch Conservative Republicans	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$100.00	2255 Firethorn Path	
		Spring Branch, TX 78070	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	otion
	OF EXPENDITURE	1 000	ck if travel outside of Texas. Complete Schedule T.
		- 1	ck if Austin, TX, officeholder living expense aign Staff membership
		Jamp	aigh Gan membership
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/OI		
_	Date	Payee name	
	01/03/2025	CAMP Political LLC	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$320.00	401 NE 46th St	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		Oklahoma City, OK 73105	
_	PURPOSE	· · · · · · · · · · · · · · · · · · ·	ation
	OF	,	ck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		ck if Austin, TX, officeholder living expense
		Design	n/Print and Ship Pushcards
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	- CAPCHARATO TO SOTIONE OF O		
	Date	Payee name	
	01/03/2025	CAMP Political LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$320.00	401 NE 46th St	
		Oklahoma City, OK 73105	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descrip	
	EXPENDITURE	Advertising Expense	ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense
			and Deliver Pushcards
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	9	
ı			

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 14/57 Rpt: 29/77	2 FILER NAME Isaac, Carrie (The Honorable)  3 Filer ID (Ethics Commission Filers) 00083642	
4	Date 01/03/2025	5 Payee name CAMP Political LLC	
6	Amount (\$) \$480.00	7 Payee address; City; State; Zip Code 401 NE 46th St  Oklahoma City, OK 73105	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Print and Ship Pushcards	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date 01/03/2025	Payee name CAMP Political LLC	
	Amount (\$) \$2,359.85	Payee address; City; State; Zip Code 401 NE 46th St  Oklahoma City, OK 73105	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Design/Print and Mail Christmas Cards	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date 01/03/2025	Payee name CAMP Political LLC	
	Amount (\$) \$5,874.89	Payee address; City; State; Zip Code 401 NE 46th St	
		Oklahoma City, OK 73105	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Design/Print and Mail Christmas Cards	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	_

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/57 Rpt: 30/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	01/13/2025	CVS
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$11.69	8200 SH 45 WB
		Austin, TX 78737
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense
	LAFLINDITORL	Check if Austin, TX, officeholder living expense
		printing campaign photos
_	Complete ONLY if direct	Condidate/Officeholder name Office county Office hold
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	<u> </u>	
	Date	Payee name
	02/28/2025	Canine Classmates
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	P. O. Box 1381
		Canyon Lake, TX 78133
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Donation for Fundraiser
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	01/23/2025	Canva
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	110 Kippax St
		Surry Hills New South Wales 2010 Australia
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Canva Pro software subscription
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	experientare to benefit 6/01	•

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/57 Rpt: 31/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	02/24/2025	Canva
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.00	110 Kippax St
		Surry Hills New South Wales 2010 Australia
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Canva Pro software subscription
		Canva i lo contrato cascon puen
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/24/2025	Canva
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	110 Kippax St
	Ψ13.00	110 Αφράλ Οι
		Surry Hills New South Wales 2010 Australia
	PURPOSE	
	OF	(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.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Canva Pro software subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	04/23/2025	Canva
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	110 Kippax St
		Surry Hills New South Wales 2010 Australia
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Canva Pro software subscription
		Canva Fio Software Subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
_	Sch: 17/57 Rpt: 32/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	05/23/2025	Canva
6	Amount (\$)	7 Payee address; City; State; Zip Code
·	\$15.00	110 Kippax St
	Ψ10.00	110 Hippar of
		Surry Hills New South Wales 2010 Australia
_	DUDDOOF	,
8	PURPOSE OF	(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.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Canva Pro software subscription
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/23/2025	Canva
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	110 Kippax St
	Ψ10.00	110 Hippar of
		Surny Hills Now South Wolce 2010 Australia
		Surry Hills New South Wales 2010 Australia
	PURPOSE OF	(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.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Canva Pro software subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	4
	Date	Payee name
	04/02/2025	Canyon Lake Republican Women PAC
	Amount (\$)	Payee address; City; State; Zip Code
	\$26.50	PO Box 2751
	Ψ20.30	1 O BOX 2731
		Companii also TV 70100
		Canyon Lake, TX 78133
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Taylor Complete Schedule T
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Canyon Lake Republican Women Luncheon
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>y</b>

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/57 Rpt: 33/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	02/05/2025	Chick-fil-A
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$365.34	503 W Martin Luther King Jr Blvd
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Catering for Pursuit Night Christian event at the
		Capitol Officeholder sponsored
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	04/23/2025	Chick-fil-A
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.67	503 Martin Luther King Jr Blvd
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Capitol staff lunch
		Capital stall lands
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	01/13/2025	Christensen, Jan
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	502 Liveoak Dr
	Ψ300.00	JUZ LIVEUAR DI
		Johnson City, TX 78636
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		wages from 1/1/25 to 1/15/25
	0 1 0 0 0 0 0 0	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/57 Rpt: 34/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	01/27/2025	Christensen, Jan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	502 Liveoak Dr
		Johnson City, TX 78636
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		wages from 1/16/25 to 1/31/25
_	0 1 0 0 1 1 1 1	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/11/2025	Christensen, Jan
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	502 Liveoak Dr
		Johnson City, TX 78636
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  wages for 2/1/25 to 2/15/25
		wages 101 2/1/23 to 2/13/23
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	Description
	Date 02/27/2025	Payee name Christopson, Jan
		Christensen, Jan
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	502 Liveoak Dr
		Johnson City, TX 78636
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		wages for 2/16/25 to 2/28/25
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 20/57 Rpt: 35/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	03/11/2025	Christensen, Jan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	502 Liveoak Dr
		Johnson City, TX 78636
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  wages for 3/1/25 to 3/15/25
		wages 101 3/1/23 to 3/13/23
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Date	Davies same
		Payee name
	03/27/2025	Christensen, Jan
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	502 Liveoak Dr
		Johnson City, TX 78636
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  wages for 3/16/25 to 3/31/25
		wages 101 3/10/23 to 3/31/23
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Data	
	Date	Payee name
	04/11/2025	Christensen, Jan
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	502 Liveoak Dr
		Johnson City, TX 78636
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  wages for 4/1/25 to 4/15/25
		wages 101 4/1/23 to 4/13/23
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/57 Rpt: 36/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	04/28/2025	Christensen, Jan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	502 Liveoak Dr
		Johnson City, TX 78636
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		wages for 4/16/25 to 4/30/25
		wages 101 4/10/23 to 4/30/23
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
$\vdash$	Data	
	Date	Payee name
	05/12/2025	Christensen, Jan
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	502 Liveoak Dr
		Johnson City, TX 78636
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		wages for 5/1/25 to 5/15/25
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	
	Date	Payee name
	05/27/2025	Christensen, Jan
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	502 Liveoak Dr
L		Johnson City, TX 78636
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		wages for 5/16/25 to 5/31/25
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 22/57 Rpt: 37/77	Isaac, Carrie (The Honorable)	00083642
4	Date	5 Payee name	- 1
	06/11/2025	Christensen, Jan	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	3928 Westerly Rd	
		Benbrook, TX 76116	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	· · · · · · · · · · · · · · · · · · ·	avel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if A	ustin, TX, officeholder living expense
		wages for	6/1/25 to 6/15/25
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	06/27/2025	Christensen, Jan	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	3928 Westerly Rd	
		Benbrook, TX 76116	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	avel outside of Texas. Complete Schedule T.
		I — I — I	ustin, TX, officeholder living expense 6/16/25 to 6/30/25
		wayes ioi	0/10/23 to 0/30/23
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office field
	Data		
	Date 03/24/2025	Payee name City of Dripping Springs	
		7 5	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$85.00	P.O. Box 384	
		Dripping Springs, TX 78620	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	
	EXPENDITURE	Event Expense	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense
		l —	parade entry for Founder's Day Parade
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 23/57 Rpt: 38/77	Isaac, Carrie (The Honorable)	00083642				
4 Date	5 Payee name	<u>'</u>				
04/02/2025	Comal County Republican Party					
6 Amount (\$)	7 Payee address; City; State; Zip C	Code				
\$205.00	265 Landa Street					
	New Braunfels, TX 78130					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF	Event Expense	Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	·	Check if Austin, TX, officeholder living expense				
		ticket to attend Fundraiser				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	ought Office held				
Date	Payee name					
06/23/2025	Direct Texas Marketing Group					
Amount (\$)	Payee address; City; State; Zip C	code				
\$116.91	1260 S. Business IH 35					
	New Braunfels, TX 78130					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Printing Expense	Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense printing officeholder handouts				
		p.mang emechanical manacate				
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held				
expenditure to benefit C/O	Н					
Date	Payee name					
05/07/2025	Drogin Group					
Amount (\$)	Payee address; City; State; Zip C	Code				
\$1,246.32	6705 W. Hwy 290 Suite 50281					
	Austin, TX 78735					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE		Check if Austin, TX, officeholder living expense				
		campaign outreach				
Complete CAULY if all a	Condidate/Officeholder # 575	Office held				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H	ought Office held				

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/57 Rpt: 39/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	01/08/2025	Fresa's 9th & Lamar
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$99.34	915 N Lamar Blvd
		Austin, TX 78703
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Capitol staff lunch
		Supitor stair furiori
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	<u> </u>	
	Date	Payee name
	06/20/2025	Goofy's Bar and Grill
	Amount (\$)	Payee address; City; State; Zip Code
	\$47.22	13124 FM 306
		Canyon Lake, TX 78133
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign staff lunch
		Campaigh stail lunch
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	<b>D</b> .	
	Date	Payee name
	01/06/2025	Google GSuite
	Amount (\$)	Payee address; City; State; Zip Code
	\$92.10	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	ZA ZADITORZ	Check if Austin, TX, officeholder living expense
		campaign email/cloud storage
_	Complete ONLY if direct	Condidate/Officeholder name Office cought
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	•	

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

OTHER (enter a category not listed above)

Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 25/57 Rpt: 40/77 Isaac, Carrie (The Honorable) 00083642 4 Date Payee name 02/05/2025 Google GSuite 6 Amount (\$) Payee address; City; State; Zip Code \$92.10 1600 Amphitheatre Pkwy Mountain View, CA 94043 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense campaign email/cloud storage Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/05/2025 Google GSuite Amount (\$) Payee address; City; State; Zip Code \$92.10 1600 Amphitheatre Pkwy Mountain View, CA 94043 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense campaign email/cloud storage Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/07/2025 Google GSuite Amount (\$) Payee address; City; State; Zip Code \$92.10 1600 Amphitheatre Pkwy Mountain View, CA 94043 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense campaign email/cloud storage Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 26/57 Rpt: 41/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	05/05/2025	Google GSuite
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$92.10	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		campaign email/cloud storage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	4
	Date	Payee name
	06/05/2025	Google GSuite
	Amount (\$)	Payee address; City; State; Zip Code
	\$92.10	1600 Amphitheatre Pkwy
		Mountain View, CA 94043
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		campaign email/cloud storage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/06/2025	Grace Preparatory Academy
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	1600 River Road
		New Braunfels, TX 78132
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Occupy America: Faith Unleashed Conference
		Sponsorship
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services  The Instruction Gu			es/Contract La		OTHER (enter a	a category not listed above)
_		-			ince explains now t	o com	nete tilis ioi			
1	Total pages Schedule F1:	2						3	Filer ID	(Ethics Commission Filers)
	Sch: 27/57 Rpt: 42/77		Isaac, Carri	e (The Honorab	le)				00083642	
4	Date	5	Payee name							
	01/30/2025		Greatland Y	'earli						
_		<del>  -</del>			Ctata: 7ia	Cade				
6	Amount (\$)	7	Payee addres	•	State; Zip	Coue	;			
	\$33.53		2480 Walke	er Ave NW						
			Grand Rapid	ds, MI 49544						
8	PURPOSE	(a)	Category	ee Categories listed at the	on top of this sahadula)	(k	) Descripti	ion		
	OF	``		head/Rental Exp		'			ide of Texas. Con	nplete Schedule T.
	EXPENDITURE		Office Overi	nedd/Nemai Exp	Jense				, officeholder livin	
							2024 10	99 form	s for campa	ign staff for federal filing
9	Complete ONLY if direct		Candidate/Offi	ceholder name	Office	souah	nt		Office h	eld
ľ	expenditure to benefit C/O		Sarraraato, Sin	ocholaci name	011100	ooug.			01110011	old
$\vdash$		_								
	Date		Payee name							
	01/13/2025		HEB							
	Amount (\$)		Payee addres	ss; City;	State; Zip	Code	)			
	\$19.46		14501 RR 1	.2						
			Wimberley,	TY 79676						
		L.				1				
	PURPOSE OF	(a)		ee Categories listed at th		(k	Descripti			
	EXPENDITURE		Office Overl	head/Rental Exp	pense				, officeholder livin	nplete Schedule T.
								office su		g expense
							Capitor	onice su	pplics	
_	Operation ONLY if allowed	<u> </u>	0		O#:				O#: I-	-1-1
	Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH									
	Date		Payee name							
	03/04/2025		HEB							
	Amount (\$)		Payee addres	ss; City;	State; Zip	Code	)			
	\$34.03		2701 East 7	-						
	Ψ04.00		ZIOI LUSTI	urot						
			Austin, TX 7	78702						
	PURPOSE	(a)	Category (Se	ee Categories listed at th	ne top of this schedule)	(k	) Descripti	ion		
	OF EXPENDITURE		Office Overl	head/Rental Exp	oense					nplete Schedule T.
	LA LINDITORE								, officeholder livin	g expense
							Capitol	office su	pplies	
	Complete ONLY if direct		Candidate/Offi	ceholder name	Office	sough	it		Office h	eld
	expenditure to benefit C/OH									
I										

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	omplete this forr	m.	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (I	Ethics Commission Filers)
Sch: 28/57 Rpt: 43/77	Isaac, Carrie (The Honorable)		00083642	
4 Date	5 Payee name		•	
05/03/2025	HEB			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$46.83	104 Hasler Blvd			
	Bastrop, TX 78602			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	on	
OF EXPENDITURE	Food/Beverage Expense	Check if	f travel outside of Texas. Complet	
LAI LINDITORE		. —	f Austin, TX, officeholder living ex	
		Capitor	office supplies and sna	ICKS
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ıaht.	Office held	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		ugni	Office field	
Data	Г _			
Date	Payee name			
05/14/2025	HEB			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$20.29	14501 RR 12			
	Wimberley, TX 78676			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Office Overhead/Rental Expense		f travel outside of Texas. Complet f Austin, TX, officeholder living ex	
			office supplies	perioc
			••	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught	Office held	
expenditure to benefit C/O	Н			
Date	Payee name			
05/26/2025	HEB			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$56.59	12021 US 290			
	Austin, TX 78737			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	on	
OF	Food/Beverage Expense		orr f travel outside of Texas. Complet	te Schedule T.
EXPENDITURE	T dod/Boverage Expense		f Austin, TX, officeholder living ex	
		Capitol o	office supplies and sna	icks
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ught	Office held	
experientitie to beliefft C/O				

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 29/57 Rpt: 44/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	02/18/2025	Hampton Inn & Suites Austin at The University/Capitol
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$202.99	1701 Lavaca St
L		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign staff lodging for TFRW Legislator Day at
		the Capitol
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1
	Date	Payee name
	04/15/2025	Hays County Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$52.40	PO Box 1928
		San Marcos, TX 78667
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  ticket to attend event
		uoket to attend event
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/14/2025	Hobby Lobby
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.58	6600 S Mopac Expwy South
		Austin, TX 78749
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Capitol office supplies
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		
l		

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ		
1	Total pages Schedule F1: Sch: 30/57 Rpt: 45/77	2 FILER NAME Isaac, Carrie (The Honorable) 3 Filer ID (Ethics Commission Filers) 00083642
4	Date	5 Payee name
	01/03/2025	Hobby Lobby
6	Amount (\$) \$105.72	7 Payee address; City; State; Zip Code 5755 Kyle Pkwy Unit 100
		Kyle, TX 78640
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EAI ENDITORE	Check if Austin, TX, officeholder living expense  Capitol office supplies
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/14/2025	Inn of the Hills
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	1001 Junction Hwy
		Kerrville, TX 78028
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		sponsorship for catering at TFRW Leadership Training conference
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/10/2025	Innovation & Technology Caucus of the Texas House of Representatives
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	1108 Lavaca Street STE 110-701
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Officeholder's caucus dues
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

Advertising Expense Event
Accounting/Banking Fees
Consulting Expense Food/
Contribution/ Onations Made By - Gift/An

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 31/57 Rpt: 46/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	06/04/2025	Insightly Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,088.00	680 Folsom Street Ste 550
		San Francisco, CA 94107
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign CRM Annual renewal
		Sampaigh Sixth / tillidal renewal
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/13/2025	Isaac, Carrie
	Amount (\$)	Payee address; City; State; Zip Code
	\$133.93	114 Augusta Lane
		Wimberley, TX 78676
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		mileage reinbursement for OUT of district travel from
		10/27/24 through 12/31/24
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/13/2025	Isaac, Carrie
	Amount (\$)	Payee address; City; State; Zip Code
	\$379.48	114 Augusta Lane
		Wimberley, TX 78676
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense mileage reinbursement for IN district travel for
		10/27/24 through 12/31/24
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
tising Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 32/57 Rpt: 47/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	03/30/2025	Isaac, Carrie
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$49.77	114 Augusta Lane
		Wimberley, TX 78676
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		mileage reinbursement for out of district travel on
		2/2/25
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/30/2025	Isaac, Carrie
	Amount (\$)	Payee address; City; State; Zip Code
	\$283.22	114 Augusta Lane
		Wimberley, TX 78676
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		mileage reinbursement for in district travel - mileage
		1/15/25 through 3/28/25
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/03/2025	Isaac, Carrie
	Amount (\$)	Payee address; City; State; Zip Code
	\$102.20	114 Augusta Lane
		Wimberley, TX 78676
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense reinburse IN district travel for April mileage
		Tembarse in district daver for 7 pm mileage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
┰	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File	orc)		
1	Sch: 33/57 Rpt: 48/77	2 FILER NAME Isaac, Carrie (The Honorable) 3 Filer ID (Ethics Commission File 00083642	115)		
4	Date	5 Payee name			
	01/09/2025	La Cosecha			
6	Amount (\$) \$68.93	7 Payee address; City; State; Zip Code 505 N. Business IH 35			
	Ψ00.93	SOS IV. Business in SS			
		New Braunfeles, TX 78130			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Food/Beverage Expense			
		Check if Austin, TX, officeholder living expense			
		Campaign staff lunch			
L					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	01/02/2025	Mail Chimp			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$117.26	675 Ponce de Leon Ave NE Suite 5000			
	, —— — ·				
		Atlanta, GA 30308			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense			
		campaign email service			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held  H			
	Date	Payee name			
	02/02/2025	Mail Chimp			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$117.26	675 Ponce de Leon Ave NE Suite 5000			
		Atlanta, GA 30308			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Office Overhead/Rental Expense			
	-	Check if Austin, TX, officeholder living expense			
		campaign email service			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI				

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

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

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
	Sch: 34/57 Rpt: 49/77	Isaac, Carrie (The Honorable)		00083642
4	Date	5 Payee name		
	03/03/2025	Mail Chimp		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$117.26	675 Ponce de Leon Ave NE Suite 5000		
		Atlanta CA 20200		
_	DUDDOOF	Atlanta, GA 30308	<i>(</i> 1- )	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(a)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Nerital Experise		Check if Austin, TX, officeholder living expense
				campaign email service
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sout	ght	Office held
_	Data			
	Date 04/02/2025	Payee name Mail Chimp		
		Payee address; City; State; Zip Co	do	
	Amount (\$) \$117.26	675 Ponce de Leon Ave NE Suite 5000	ue	
	Ψ117.20	073 T Office de Econ7 We IVE Suite 3000		
		Atlanta, GA 30308		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				campaign email service
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	05/02/2025	Mail Chimp		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$117.26	675 Ponce de Leon Ave NE Suite 5000		
		Atlanta, GA 30308		
	PURPOSE OF	,	(b)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense		Check if Austin, TX, officeholder living expense
				campaign email service
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
	Superiorder to benefit 6/01			

#### SCHEDULE F1

Solicitation/Fundraising Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Transportation Equipment & Related Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 35/57 Rpt: 50/77 Isaac, Carrie (The Honorable) 00083642 4 Date Payee name 06/02/2025 Mail Chimp 6 Amount (\$) Payee address; City; State; Zip Code \$117.26 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense campaign email service Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/29/2025 Manteca, Kayla Amount (\$) Payee address; City; State; Zip Code \$500.00 2200 Nueces St. Austin, TX 78705 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense campaign staff wages Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/17/2025 Marriott Amount (\$) Payee address: City; State; Zip Code \$225.95 889 E. Market St. San Antonio, TX 78205 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense House Committee on Homeland Security/Public Safety & Veterans' Affairs meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 36/57 Rpt: 51/77	2 FILER NAME Isaac, Carrie (The Honorable) 3 Filer ID (Ethics Commission Filers) 00083642
4	Date 03/17/2025	5 Payee name Marriott
6	Amount (\$) \$30.66	7 Payee address; City; State; Zip Code 889 E. Market St.
8	PURPOSE OF EXPENDITURE	San Antonio, TX 78205  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Officeholder parking for conference
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 01/02/2025	Payee name Miller, Olivia
	Amount (\$) \$540.00	Payee address; City; State; Zip Code 46 Crazy Cross Road Wimberley, TX 78676
	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 campaign staff pay
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 02/03/2025	Payee name Miller, Olivia
	Amount (\$) \$540.00	Payee address; City; State; Zip Code 46 Crazy Cross Road
		Wimberley, TX 78676
	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 campaign staff pay
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer II	(Ethics Commission Filers)
	Sch: 37/57 Rpt: 52/77	Isaac, Carrie (The Honorable)	3642
4	Date	5 Payee name	
	03/03/2025	Miller, Olivia	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$540.00	46 Crazy Cross Road	
l			
		Wimberley, TX 78676	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Salaries/Wages/Contract Labor	
l		Check if Austin, TX, officehold campaign staff pay	Jer living expense
		Campaign stan pay	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Of	ffice held
	expenditure to benefit C/OI		lice field
⊨	Date	Davis name	
l	04/02/2025	Payee name Miller, Olivia	
┡			
l	Amount (\$) \$540.00	Payee address; City; State; Zip Code 46 Crazy Cross Road	
l	Φ340.00	40 Crazy Cross Road	
l		Wiesh orless, TV 7007C	
		Wimberley, TX 78676	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Lahor  Check if travel outside of Tex	as Camplota Schodula T
l	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Tex	
l		campaign staff pay	
Г	Complete ONLY if direct		ffice held
L	expenditure to benefit C/OI	DH	
Г	Date	Payee name	
	05/02/2025	Miller, Olivia	
Г	Amount (\$)	Payee address; City; State; Zip Code	
l	\$540.00	46 Crazy Cross Road	
l			
		Wimberley, TX 78676	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Tex	·
l		Check if Austin, TX, officehold campaign staff pay	Jer living expense
		Campaign Stall pay	
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Of	ffice held
	expenditure to benefit C/OI		noo nota
$\vdash$			
ı			

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 38/57 Rpt: 53/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	06/02/2025	Miller, Olivia
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$540.00	46 Crazy Cross Road
		Wimberley, TX 78676
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  campaign staff pay
		Sampaigh Stall pay
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	01/16/2025	New Braunfels Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$230.00	390 S Seguin Ave
	Ψ200.00	333 3 33guii 7 W
		New Braunfels, TX 78130
	PURPOSE	(4)
	OF	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		dues for campaign office membership
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit Gree	
	Date	Payee name
	01/07/2025	New Braunfels Conservatives
	Amount (\$)	Payee address; City; State; Zip Code
	\$135.00	PO Box 310008
		New Braunfels, TX 78131
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Membership for campaign staff
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Fil	ers)
	Sch: 39/57 Rpt: 54/77	Isaac, Carrie (The Honorable) 00083642	
4	Date	5 Payee name	
	06/16/2025	New Braunfels Conservatives	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$150.00	PO Box 310008	
		New Braunfels, TX 78131	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  membership for Officeholder and campaign volu	ınteer
		monitoriorispi or Cinconolidor and Campaign vol.	ai 1001
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	Н	
	Date	Payee name	
	03/31/2025	New Braunfels Noon Lions Club	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$200.00	PO Box 310194	
		New Braunfels, TX 78131	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
	LAI LINDITORE	Check if Austin, TX, officeholder living expense	
		tickets to 100th Anniversary Celebration	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
	Date	Payee name	
	05/26/2025	New Braunfels Parks Foundation	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$532.50	110 Golf Course Road	
		New Braunfels, TX 78130	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITORE	Check if Austin, TX, officeholder living expense	
		Event Sponsorship	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 40/57 Rpt: 55/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	06/16/2025	New Braunfels Parks Foundation
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$49.06	110 Golf Course Road
		New Braunfels, TX 78130
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign volunteer registration in event
		Campaigh volunteer registration in event
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Date	David and the second se
	06/18/2025	Payee name  New Braunfels Parks Foundation
	Amount (\$)	Payee address; City; State; Zip Code
	\$87.32	110 Golf Course Road
		New Braunfels, TX 78130
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign volunteer registration in event
		Campaigh volunteer registration in event
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date 02/27/2025	Payee name
		OSO Marketing LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$140.73	237 Limestone Trl
		Austin, TX 78737
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Capitol office supplies
		Ομριτοί οπίσε συμμίεσ
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 41/57 Rpt: 56/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	05/29/2025	OSO Marketing LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5,002.63	237 Limestone Trail
		Austin, TX 78737
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		campaign swag to distribute at parade
_		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/21/2025	OpenAl LP
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.28	3180 18th Street
		San Francisco, CA 94110
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
	_/	Check if Austin, TX, officeholder living expense  Campaign ChatGPT Plus subscription
		Campaign Chater Flus subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	
	Date 03/21/2025	Payee name OpenAl LP
		· · · · · · · · · · · · · · · · · · ·
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.28	3180 18th Street
		San Francisco, CA 94110
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign ChatGPT Plus subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 42/57 Rpt: 57/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	02/21/2025	OpenAl LP
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$21.28	3180 18th Street
		San Francisco, CA 94110
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign ChatGPT Plus subscription
		Campaigh Chatch 11 lus subscription
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
$\vdash$	Date	Davies same
		Payee name
	04/21/2025	OpenAl LP
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.28	3180 18th Street
		San Francisco, CA 94110
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign ChatGPT Plus subscription
		Campaigh Chater Frus subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date 05/21/2025	Payee name OpenAI LP
		THE STATE OF THE S
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.28	3180 18th Street
		San Francisco, CA 94110
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign ChatGPT Plus subscription
		Sampaign Chater 1 1 las subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 43/57 Rpt: 58/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	06/23/2025	OpenAl LP
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$21.28	3180 18th Street
		San Francisco, CA 94110
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign ChatGPT Plus subscription
		Campaigh Chatch 11 lus subscription
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
H	Date	Payee name
	02/20/2025	PMC Parking
	Amount (\$)	Payee address; City; State; Zip Code
	\$28.15	601 1/2 E 4th St
	Ψ20.13	001 1/2 E 4til 3t
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Officehold's parking for the Texas Travel Unity Dinner
	Operation ONLY if allowed	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/03/2025	Pick, Teresa
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	155 Pinnacle Pkwy
		New Braunfels, TX 78132
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  campaign staff pay
		σαπραίχη σταπ ραγ
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

#### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 44/57 Rpt: 59/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	02/03/2025	Pick, Teresa
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	155 Pinnacle Pkwy
		New Braunfels, TX 78132
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		campaign staff pay
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H .
	Date	Payee name
	03/03/2025	Pick, Teresa
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	155 Pinnacle Pkwy
		New Braunfels, TX 78132
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		campaign staff pay
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	04/03/2025	Pick, Teresa
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	155 Pinnacle Pkwy
	7=00.00	
		New Braunfels, TX 78132
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAPENDITORE	Check if Austin, TX, officeholder living expense
		campaign staff pay
	Complete ONLY if direct	Condidate/Office helder name Office accepts Office held
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 45/57 Rpt: 60/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	05/05/2025	Pick, Teresa
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	155 Pinnacle Pkwy
		New Braunfels, TX 78132
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		campaign staff pay
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	06/03/2025	Pick, Teresa
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	155 Pinnacle Pkwy
	Ψ230.00	155 i illitacie i kwy
		New Braunfels, TX 78132
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  campaign staff pay
		Sampaigh stan pay
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Power name
	01/09/2025	Payee name Pit Stop Foof Mart #9
		·
	Amount (\$)	Payee address; City; State; Zip Code 1293 FM 306
	\$146.00	1293 FIVI 300
		New Braunfels, TX 78130
	DUDDOCE	
	PURPOSE OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		campaign postage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 46/57 Rpt: 61/77	Isaac, Carrie (The Honorable)	00083642
4	Date	5 Payee name	
Ļ	02/25/2025	Preserve Our Hill Country Environment	
١	Amount (\$) \$175.26	7 Payee address; City; State; Zip Code P. O. Box 310431	
	Ψ170.20	1.0.500010401	
		New Braunfels, TX 78131	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense ticket for Wonders Down Under fundraiser
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	experialiture to benefit C/Oi	1	
	Date	Payee name	
L	01/07/2025	Red Stiletto Republican Women	
	Amount (\$) \$35.00	Payee address; City; State; Zip Code 562 S State Hwy 123 Bypass Ste 141	
	ψ33.00	302 3 State (1W) 123 Dypass Ste 141	
		Seguin, TX 78155	
┢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense  Membership for campaign staff
			, , ,
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
L	expenditure to benefit C/OI	1	
	Date	Payee name	
L	02/25/2025	Republican Club of Comal County	
	Amount (\$) \$100.00	Payee address; City; State; Zip Code 265 Landa St	
	Ψ100.00	200 Landa St	
		New Braunfels, TX 78130	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense  Campaign staff yearly membership
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
L	expenditure to benefit C/OI	1	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
se Event Expense Loan Repayment/Reimbu

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 47/57 Rpt: 62/77	2 FILER NAME Isaac, Carrie (The Honorable) 3 Filer ID (Ethics Commission Filers) 00083642
4	Date 05/23/2025	5 Payee name River City Screen Printing & Embroidery
6	Amount (\$) \$409.77	7 Payee address; City; State; Zip Code 1705 S. IH 35
		San Marcos, TX 78666
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Capitol and campaign staff gifts
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 02/10/2025	Payee name Ryan Data & Research
	Amount (\$) \$200.00	Payee address; City; State; Zip Code PO Box 202675  Austin, TX 78720
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  campaign data
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 03/31/2025	Payee name Safari Club International (Austin)
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 2121 E Oltorf St Ste 2
		Austin, TX 78741
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  sponsorship for Safari Club fundraiser for game wardens
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Con Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 48/57 Rpt: 63/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	01/06/2025	Sam's Club
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$107.16	1350 Leah Ave
		San Marcos, TX 78666
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign office supplies
		campaign onice supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	06/12/2025	Startz Memorial VFW Post 8800
H	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	7755 FM 2673
	Ψ230.00	7733 T W 2073
		Canyon Lake, TX 78133
Н	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Sponsorship for Startz VFW July 4th parade
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
⊨		
	Date	Payee name
	05/29/2025	Target
	Amount (\$)	Payee address; City; State; Zip Code
	\$888.44	5300 S MoPac Expy
		Austin, TX 78749
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Capitol staff gifts
		Capitor stair girls
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		
I		

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services			Vages	/Contract Labor		OTHER (enter a	a category not listed above)	
				The Instruction (	Guide explains	how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filer	s)
	Sch: 49/57 Rpt: 64/77		Isaac, Carrie	e (The Honora	ble)					00083642		
4	Date	5	Payee name									
	05/29/2025		Target									
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip Co	de					
	\$206.00		5300 S MoF	ас Ехру								
			Austin, TX 7	'8749								
8	PURPOSE	(a)	Category (Se	e Categories listed a	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE			Memorials Ex							nplete Schedule T.	
	EXI ENDITORE							_		officeholder livin	g expense	
								Capitol staff g	gift			
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	ceholder name	(	Office sou	ght			Office h	eld	
	experialitire to benefit C/Oi	' '										
	Date		Payee name									
	03/04/2025		Texas Depa	rtment of Crim	inal Justice	-Employ	ee S	Sales				
	Amount (\$)		Payee addres	ss; City;	State	; Zip Co	de					
	\$441.66		PO Box 401	.3								
			Huntsville, T	X 77342								
	PURPOSE	(a)	Category (Se	e Categories listed a	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE			s/Donations M		,		Check if travel	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITORE		Candidate/C	Officeholder/Po	litical Comm	ittee		<b>—</b>		officeholder livin		
								donation for o	cha	ritable fund	Iraiser auction	
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Office	ceholder name	(	Office sou	ght			Office h	eld	
	experientare to benefit 6/61	_										
	Date		Payee name									
	02/27/2025		Texas Fede	ration of Repu	blican Wome	en (TFR)	W) F	PAC				
	Amount (\$)		Payee addres	ss; City;	State	; Zip Co	de					
	\$500.00		PO Box 171	.146								
			Austin, TX 7	8717								
	PURPOSE	(a)	Category (Se	e Categories listed a	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Advertising		·	,		Check if travel	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE			•				ш		officeholder livin	- '	
								Sponsorship	for	TFRW Leg	islative Day	
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	ceholder name	(	Office sou	ght			Office h	eld	
L	experiorare to benefit C/Of	п										

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Cor Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
Ļ		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 50/57 Rpt: 65/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	02/18/2025	Texas Federation of Republican Women PAC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$90.00	13740 N Highway 183 Suite J4
		Austin, TX 78750
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Officeholder's registration for TFRW Legislative Day
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	02/18/2025	Texas Federation of Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.06	13740 N Highway 183 Suite J4
		Austin, TX 78750
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		campaign staff's online registration credit card processing fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/18/2025	Texas Federation of Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$90.00	13740 N Highway 183 Suite J4
		Austin, TX 78750
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	LAF LINDI I URE	Check if Austin, TX, officeholder living expense
		Campaign staff registration for TFRW Legislative
		Day
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 51/57 Rpt: 66/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	02/18/2025	Texas Federation of Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4.06	13740 N Highway 183 Suite J4
		Austin, TX 78750
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Officeholder's online registration credit card
		processing fee
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/11/2025	Texas Freedom Caucus
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	P.O. Box 806
		Austin, TX 78767
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.  Check if Austin TV office helder living evenese.
		Candidate/Officeholder/Political Committee
		2 Silvatorii
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/08/2025	Texas Freedom Caucus
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	P.O. Box 806
		Austin, TX 78767
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Officeholder dues
		Officeriolder dues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

l	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
L	Sch: 52/57 Rpt: 67/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
L	02/03/2025	Texas House Republican Caucus
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code P.O. Box 13305  Austin, TX 78711
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Officeholder membership dues 25-26
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
L	02/06/2025	Texas Values
	Amount (\$) \$5.12	Payee address; City; State; Zip Code  1005 Congress Ave
		Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Officeholder registration for Texas Faith and Family  Day 2025
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 01/14/2025	Payee name TexasFederation of Republican Women
	Amount (\$) \$30.00	Payee address; City; State; Zip Code PO Box 171146
		Austin, TX 78717
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign Staff Registration for TFRW Leadership Training Conference
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services  The Instruction Guid	Salaries/V	Vages	s/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAMI	<b>=</b>				3	Filer ID	(Ethics Commission Filer	s)
	Sch: 53/57 Rpt: 68/77	Isaac, Carr	ie (The Honorable)	)				00083642		
4	Date	5 Payee name								
	03/12/2025	The Capita	l Grille							
6	Amount (\$)	<b>7</b> Payee addre	ess; City;	State; Zip Co	ode					
	\$27.73	117 W. 4th	Street							
		Austin, TX	78701							
8	PURPOSE OF		ee Categories listed at the	top of this schedule)	(b)	Description				
	EXPENDITURE	Food/Beve	rage Expense					de of Texas. Comp		
						ш		officeholder living	xas House Republica	'n
						Caucus even		noider at re	nas i louse republica	uı
9	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	l ıght			Office he	eld	
	expenditure to benefit C/OI	H								
	Date	Payee name								
	03/21/2025	The Univer	sity of Texas at Au	stin						
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$18.00	300 W. Ma	rtin Luther King Jr.	Blvd						
		Austin, TX	78705							
	PURPOSE	(a) Category (S	ee Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE	Travel Out	of District					de of Texas. Com		
						<b>—</b>		officeholder living		Day
						event	aii į	parking at th	e TFRW Legislature	Day
	Complete ONLY if direct		iceholder name	Office sou	ıght			Office he	eld	
	expenditure to benefit C/OI	1								
	Date	Payee name								
	03/09/2025	Tricia Quin	tero4DSISD							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$2,500.00	142 Rainm	aker Cv							
		Austin, TX	78737							
	PURPOSE		ee Categories listed at the t		(b)	Description				
	OF EXPENDITURE		ns/Donations Mad					de of Texas. Com		
		Candidate/	Officeholder/Politic	cal Committee		ш		officeholder living		
						uonauon to Ci	aiii	paigii 101 DS	SISD school board	
$\vdash$	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	laht			Office he	eld	
	expenditure to benefit C/O		.cc.roidor riamo	511100 300	-9·11			Silloc He		
1										

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 54/57 Rpt: 69/77	2 FILER NAME Isaac, Carrie (The Honorable)  3 Filer ID (Ethics Commission Filers) 00083642
4	Date 01/30/2025	5 Payee name UPS Store 5486
6	Amount (\$) \$420.00	7 Payee address; City; State; Zip Code 100 Commons RD STE 7
		Dripping Springs, TX 78620
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 yearly campaign mailbox renewal
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 01/23/2025	Payee name USPS
	Amount (\$) \$73.00	Payee address; City; State; Zip Code 651 N Business IH 35 STE 420
		New Braunfels, TX 78130
	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 campaign postage
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 01/23/2025	Payee name United Airlines Inc.
	Amount (\$) \$412.17	Payee address; City; State; Zip Code 233 S. Wacker Drive
		Chicago, IL 60606
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel Out of District  (b) Description    X   Check if travel outside of Texas. Complete Schedule T.   Check if Austin, TX, officeholder living expense travel to conference
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 55/57 Rpt: 70/77	Isaac, Carrie (The Honorable) 00083642
4	Date	5 Payee name
	02/01/2025	Walmart
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$114.52	488 Hwy 71 W
		Bastrop, TX 78602
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Capitol office snacks
		Capitor office stracks
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	03/14/2025	Walmart
H	Amount (\$)	Payee address; City; State; Zip Code
	\$41.41	488 Highway 71 W
		Bastrop, TX 78602
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Capitol office supplies
		Capitor office supplies
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	04/07/2025	Walmart
H	Amount (\$)	Payee address; City; State; Zip Code
	\$109.56	488 State Hwy 71
		Bastrop, TX 78602
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LXI ENDITORE	Check if Austin, TX, officeholder living expense
		Capitol office supplies and snacks
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
$\vdash$		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 56/57 Rpt: 71/77	Isaac, Carrie (The Honorable) 00083642					
4	Date	5 Payee name					
	06/27/2025	Whim Hospitality					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$161.71	PO Box 664					
		Dripping Springs, TX 78620					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense equipment rented for fundraiser					
		equipment rented for fundraiser					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O						
_	<u> </u>						
	Date	Payee name					
	01/09/2025	Wimberley Flower Shop					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$117.49	13600 Ranch Road 12 Suite B					
		Wimberley, TX 78676					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense					
		funeral flowers for constiuent					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OH						
⊨	Date	Power name					
	06/14/2025	Payee name Wimberley Valley Chamber of Commerce					
_							
	Amount (\$)	Payee address; City; State; Zip Code					
	\$155.00	PO. Box 12					
L		Wimberley, TX 78676					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.					
		Campaign parade entry registration for Wimberley					
		4th of July parade					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to co	-	lete this form.
1	Total pages Schedule F1:	·		3 Filer ID (Ethics Commission Filers)
	Sch: 57/57 Rpt: 72/77	Isaac, Carrie (The Honorable)		00083642
4	Date	5 Payee name		·
	06/18/2025	Wimberley Village Library		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$40.00	400 FM Rd 2325		
		Wimberley, TX 78676		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Printing Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				printing officeholder materials
				, , , , , , , , , , , , , , , , , , , ,
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	06/24/2025	WinRed		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$151.28	1776 Wilson Blvd. Suite 530		
		Arlington, VA 22219		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Solicitation/Fundraising Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				credit card processing fees from 6/24/25 to 6/30/25
				<b>3</b>
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI		•	

#### UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 73/77 Isaac, Carrie (The Honorable) 00083642 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS \$ 5 Date Payee name 06/03/2025 **Drogin Group** Amount (\$) Payee address; City; State; Zip Code \$1,381.14 6705 W. Hwy 290 Suite 50281 Austin, TX 78735 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense campaign messaging in the district 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 1/1 Rpt: 74/77 Isaac, Carrie (The Honorable) 00083642 Date Payee name 05/26/2025 Twitter, Inc. 6 Amount (\$) Payee address; City; State; Zip Code \$90.72 1355 Market Street Suite 900 Reimbursement from political contributions intended Х San Francisco, CA 94103 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** X Premium yearly subscription Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

## INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 75/77 2 FILER NAME Filer ID (Ethics Commission Filers) Isaac, Carrie (The Honorable) 00083642 Date 8 Amount (\$) 5 Name of person from whom amount is received 06/10/2025 Amazon \$81.18 6 Address of person from whom amount is received; City; State; Zip Code Seattle, WA 98108 Purpose for which amount is received Check if political contribution returned to filer refund for gift item returned Name of person from whom amount is received Amount (\$) Date 03/18/2025 Canyon Lake Republican Women \$30.00 Address of person from whom amount is received; City; State; Zip Code Canyon Lake, TX 78133 Purpose for which amount is received Check if political contribution returned to filer staff training registration fee Date Name of person from whom amount is received Amount (\$) 04/08/2025 Canyon Lake Republican Women \$90.00 Address of person from whom amount is received; City; State; Zip Code Canyon Lake, TX 78133 Purpose for which amount is received Check if political contribution returned to filer staff event registration fee

#### IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS 1 Total pages Schedule T: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 76/77 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Isaac, Carrie (The Honorable) 00083642 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee United Airlines Inc. 5 Contribution / Expenditure reported on: X Schedule F1 Schedule A2 Schedule B Schedule C2 Schedule D Schedule B(J) Schedule F4 Schedule COH-UC Schedule F2 Schedule G Schedule H 6 Dates of Travel 7 Name of person(s) traveling Isaac, Carrie (The Honorable) 8 Departure city or name of departure location 01/24/2025 Austin, TX 9 Destination city or name of destination location 01/24/2025 Jacksonville, FL 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event) Attending Conference Commercial Airplane

TEXT ANNOTATION	
	Sch: 1/1 Rpt: 77/77
FILER NAME	Filer ID (Ethics Commission Filers)
Isaac, Carrie (The Honorable)	00083642
Schedule	
A1	
Information entered by filer as a memo:  The date, 5/22/2025, of Debbie G. Asbury's electronic contribution was during the morator	ium. Once its denosit was noticed, the
contribution was immediately deemed rejected and the amount was refunded.	idii. Once its deposit was noticed, the
Contribution from Geoffrey Tahuahua was a campaign check.	