CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

Filer ID (Eth	ics Commission Filers)	2 Total pages filed:			OFFICE	USE ONLY
00085955		33			Date Received	
CANDIDATE /	MS / MRS / MR	FIRST		MI	ELECTRONIC	CALLY FILED
OFFICEHOLDER NAME	The Honorable	Angelia Duke			07/30/2025	
	NICKNAME	LAST		SUFFIX	"	
		Orr			Date Hand-delivered	d or Date Postmarked
ORIGINAL	X January 15	Runoff	Other (s	pecify)	Bate Hand-delivered	d of Date i ostilarked
REPORT TYPE	July 15	Exceeded modified	reporting limit		Receipt #	Amount
	30th day before election	15th day after cam			_	
	8th day before election	appointment (office	• • •		Date Processed	
ORIGINAL PERIOD				Year	<u> </u>	
COVERED	Month Day Yea	THROUGH	Month Day 12/31/2024	i eai	Date Imaged	
EXPLANATION OF C			12/31/2024			
	CORRECTION I noticed that several contri	hutions that ware local	ly accepted by the co-	mnaign hefere	the fundraising m	oratorium word
AFFIDAVIT		and	ear, or affirm, under po correct. ck the box next to any	, , ,		ted report is true
AFFIDAVIT		and	correct.	and all applicas: I swear, or aith and without	able statements: r affirm that the or t an intent to misle	riginal report ead or to
AFFIDAVIT		and Che	correct. ck the box next to any Semiannual reports was made in good fa	and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busing ginally filed is in	able statements: r affirm that the or t an intent to misle ined in the report. t, that I am filing thess day after the conaccurate or incon	riginal report ead or to his corrected date I learned mplete. I
AFFIDAVIT		and Che	correct. ck the box next to any Semiannual reports was made in good fa misrepresent the info Other reports: I s report not later than that the report as ori swear, or affirm, that filed was made in go	and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in any error or or ood faith.	able statements: r affirm that the or t an intent to misle ined in the report. t, that I am filing thess day after the conaccurate or incon	riginal report ead or to his corrected date I learned mplete. I
		and Che	correct. ck the box next to any Semiannual reports was made in good fa misrepresent the info Other reports: Is report not later than that the report as ori swear, or affirm, that filed was made in go	and all applicates: I swear, or aith and without ormation contains the 14th busine ginally filed is in any error or or or faith.	able statements: r affirm that the or t an intent to misle ined in the report. , that I am filing the ess day after the o naccurate or incor mission in the rep	riginal report ead or to his corrected date I learned mplete. I
	AMP / SEAL ABOVE	and Che	correct. ck the box next to any Semiannual reports was made in good fa misrepresent the info Other reports: Is report not later than that the report as ori swear, or affirm, that filed was made in go	and all applicates: I swear, or aith and without ormation contains the 14th busine ginally filed is in any error or or or faith.	able statements: r affirm that the or t an intent to misle ined in the report. t, that I am filing the ess day after the of naccurate or incommission in the rep	riginal report ead or to his corrected date I learned mplete. I
AFFIX NOTARY ST		and Che X	correct. ck the box next to any Semiannual reports was made in good fa misrepresent the info Other reports: I s report not later than that the report as ori swear, or affirm, that filed was made in go The F Signatu	e and all applica s: I swear, or aith and without ormation contai swear, or affirm the 14th busine ginally filed is in t any error or or ood faith.	able statements: r affirm that the or t an intent to misle ined in the report. t, that I am filing the ess day after the o naccurate or incor mission in the rep gelia Duke Orr e or Officeholder	riginal report ead or to his corrected date I learned mplete. I ort as originally
AFFIX NOTARY ST Sworn to and subsc	ribed before me, by the sai	and Che	Semiannual reports was made in good famisrepresent the info Other reports: Is report not later than that the report as oris swear, or affirm, that filed was made in go The H Signature	s: I swear, or aith and without ormation contains wear, or affirm the 14th busing ginally filed is interested any error or or ordinate. Honorable Angure of Candidate.	able statements: r affirm that the or t an intent to misle ined in the report. t, that I am filing the ess day after the o naccurate or incor mission in the rep gelia Duke Orr e or Officeholder	riginal report ead or to his corrected date I learned mplete. I ort as originally
AFFIX NOTARY ST Sworn to and subsc		and Che	Semiannual reports was made in good famisrepresent the info Other reports: Is report not later than that the report as oris swear, or affirm, that filed was made in go The H Signature	s: I swear, or aith and without ormation contains wear, or affirm the 14th busing ginally filed is interested any error or or ordinate. Honorable Angure of Candidate.	able statements: r affirm that the or t an intent to misle ined in the report. t, that I am filing the ess day after the o naccurate or incor mission in the rep gelia Duke Orr e or Officeholder	riginal report ead or to his corrected date I learned mplete. I ort as originally

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comp	olete this form.	1 Filer ID (Ethics Comm 00085955		2 Total pages filed: 33	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY	,
OFFICEHOLDER NAME	The Honorable	Angelia Duke			Date Received	
					ELECTRONICALLY FILED)
	NICKNAME	LAST		SUFFIX	07/30/2025	
	NICKNAME	Orr		SUFFIX	0170072020	
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	T / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Postmarker	d
MAILING	PO Box 337				Receipt # Amount	
ADDRESS					, and an	
Change of Address	Itasca, TX 76055				Date Processed	
					Date Imaged	
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI		
NAME	Mr.	Robert				
	NICKNAME	LAST		SUFFIX		
		Cervenka				
6 CAMPAIGN	STREET ADDRESS (NO PO	O BOX PLEASE);	AP	T / SUITE #; CIT	Y; STATE; ZIP	CODE
TREASURER ADDRESS	1965 Mount Moriah Rd.					
(Residence or Business)						
(Riesel, TX 76682					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER E	EXTENSION			
TREASURER	(254) 875-2286	INE NOWBER E	EXTENSION			
PHONE	(254) 675-2260					
8 REPORT						
TYPE	X January 15	30th day before	election	Runoff	15th day after campaign treasure	er
				E d. d d'e. d	appointment (officeholder only)	
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)	
0 DEDIOD	Month Day Year			Month Do	. Voor	
9 PERIOD COVERED	Month Day Year 10/27/2024	TH	IROUGH	Month Day 12/31/20		
	10/2//2024			12/31/20) <u>_</u>	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
20 222011011	Month Day Year	P	rimary	Runoff	Other	
	11/05/2024		-	Crossial		
		XG	eneral	Special		
44 055105	OFFICE LIE S ("			40 055105 051151	IT (if los sours)	
11 OFFICE	OFFICE HELD (if any)	striot 12		12 OFFICE SOUGH		
	State Representative Dis	AHICL 13		State Represer	ntative District 13	
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

3 of 33

13 C / OH NAME	C / OH NAME Orr, Angelia Duke (The Honorable) 14 Filer ID 00085955			(Ethics Com	nmission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures	accepted or political expenditu may have been made without t quired to report this information	the candidate's or offic	eholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	E			
ш .	GENERAL					
		COMMITTEE ADD	RESS			
	SPECIFIC					
		COMMITTEE CAM	PAIGN TREASURER NAME			
		COMMITTEE CAM	PAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS			ONTRIBUTIONS (OTHER THAI CONTRIBUTIONS MADE ELEC		\$	0.00
		CAL CONTRIBUTION PLEDGES, LOANS,	NS OR GUARANTEES OF LOANS	5)	\$	70,250.00
EXPENDITURE TOTALS						
	4. TOTAL POLITIC	CAL EXPENDITURE	s		\$	23,717.10
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		S MAINTAINED AS OF THE L	AST DAY OF THE	\$	113,088.23
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		L OUTSTANDING LOANS AS	OF THE LAST DAY	\$	53,451.40
17 AFFIDAVIT		1	l swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.			
		_	The Honor	rable Angelia Duke	Orr	
			Signature of	Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subs	cribed before me, by the s	aid		, this the		day
of	, 20, to co	ertify which, witness	my hand and seal of office.			
Signature of offi	cer administering	Printed name	of officer administering	Title of office	er administer	ing oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				4 of 33
18 FILER NAME		19 Filer ID	(Ethics Commiss	ion Filers)
Orr, Angelia Duke (The Honorable)		00085955		
20 SCHEDULE SUBTOTALS			SUBTOTAL	AMOUNT
NAME OF SCHEDULE				
1. X SCHEDULE A1: MONETARY POLITICAL CO	NTRIBUTIONS		\$	70,250.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND)	POLITICAL CONTRIBUTIONS		\$	
3. SCHEDULE B: PLEDGED CONTRIBUTIONS			\$	
4. SCHEDULE E: LOANS			\$	
5. X SCHEDULE F1: POLITICAL EXPENDITURES	FROM POLITICAL CONTRIBUTION	S	\$	20,582.60
6. SCHEDULE F2: UNPAID INCURRED OBLIGA	ATIONS		\$	
7. SCHEDULE F3: PURCHASE OF INVESTMEN	NTS FROM POLITICAL CONTRIBUTI	ONS	\$	
8. X SCHEDULE F4: EXPENDITURES MADE BY	CREDIT CARD		\$	1,515.76
9. X SCHEDULE G: POLITICAL EXPENDITURES	FROM PERSONAL FUNDS		\$	1,618.74
10. SCHEDULE H: PAYMENT FROM POLITICAL	CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11. SCHEDULE I: NON-POLITICAL EXPENDITUR	RES FROM POLITICAL CONTRIBUTI	ONS	\$	
12. SCHEDULE K: INTEREST, CREDITS, GAINS, TO FILER	REFUNDS, AND CONTRIBUTIONS	RETURNED	\$	

	MONEI	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE <i>A</i>	\1
	The Instru	ction Guide explains how to complete this fo	rm.	1 Total pages Sch Sch: 1/13 Rpt		
2	FILER NAME Orr, Angelia	Duke (The Honorable)		3 Filer ID (Ethic 00085955	s Commission File	rs)
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Cont	ribution (\$)	
	12/09/2024	AFSCME TX Correctional Officers Political Action	n Committee			00.00
		6 Contributor address; City; State; Zip Code				
		Huntsville, TX 77320				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date Full name of contributor X out-of-state PAC (ID#: C00251876)			Amount of Cont	tribution (\$)	
	12/06/2024	AMGEN Inc. Political Action Committee			` ,	00.00
		Contributor address; City; State; Zip Code				
	Contributor address, City, State, Zip Code					
		Thousand Oaks, CA 91320				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
H	Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of Cont	ribution (\$)	
	12/06/2024	AT&T Texas Political Action Committee				00.00
		Contributor address; City; State; Zip Code			, ,-	
		, <i>,</i> , , ,				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor X out-of-state PAC (ID#:CI	00536573)	Amount of Cont	tribution (\$)	
	12/06/2024	Abbvie Political Action Committee			\$1,0	00.00
		Contributor address; City; State; Zip Code				
		North Chicago, IL 60064				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Data		, 1		wile wile (ф)	
	Date 12/11/2024	Full name of contributor ut-of-state PAC (ID#: Action Behavior Centers Texas Political Action C	ommittoo	Amount of Cont		00.00
	12/11/2024				φ2,0	00.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78746				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to	complete this form	1.	1	Total pages Schedule A1: Sch: 2/13 Rpt: 6/33	
2	FILER NAME Orr, Angelia	Duke (The Honorable)			3	Filer ID (Ethics Commission 00085955	on Filers)
4	Date 12/09/2024	Ahlberg, Trevor (Mr.)	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$5,000.00
		Irving, TX 75038					
8	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Cottonwood Financial)		
	Date 12/09/2024	Allen Boone Humphries Robin Contributor address; City; State;)		Amount of Contribution (\$)	\$500.00
	Principal occu	Houston, TX 77027 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 10/31/2024	Full name of contributor BNSF RAILPAC Contributor address; City; State; Fort Worth, TX 75161	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/06/2024	Full name of contributor CRAFTPAC Contributor address; City; State; Austin, TX 78756	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 11/04/2024	Full name of contributor Calpine Corporation Political A Contributor address; City; State; Houston, TX 77002-2743				Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			1				

	MONET	ARY POLITICAL CONTRIBUT	SCHEDULE A			
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 3/13 Rpt: 7/33	
2	FILER NAME Orr, Angelia	Duke (The Honorable)		3	Filer ID (Ethics Commission 00085955	on Filers)
4	Date 12/09/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$300.00
_	Deinsinal assu	Austin, TX 78701	C. Francis on (Con Instruction	<u>-/</u>		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (IE Capital Leadership Fund Contributor address; City; State; Zip Code) #:)		Amount of Contribution (\$)	\$250.00
	Delinational	Austin, TX 78701	Faralana (Octobration			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (IE Charter Communications, Inc. Texas Political Contributor address; City; State; Zip Code	Action Committee		Amount of Contribution (\$)	\$500.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (IE Charter Schools Now Political Action Commit Contributor address; City; State; Zip Code Austin, TX 78704	tee		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 12/06/2024	Full name of contributor X out-of-state PAC (IE Comcast Corp. & NBCUniversal Political Action Contributor address; City; State; Zip Code Philadelphia, PA 19103	on Committee		Amount of Contribution (\$)	\$1,000.00
	Principal occu	oation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CO	NTRIBUTION	S 		SCHEDUL	E A1
	The Instru	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 4/13 Rpt: 8/33	
2	FILER NAME Orr, Angelia	Duke (The Honorable)			3	Filer ID (Ethics Commission 00085955	on Filers)
4	Date 12/13/2024	5 Full name of contributor Cross Oak Group6 Contributor address; City; State;	out-of-state PAC (ID#: Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 12/06/2024	Full name of contributor Davis Kaufman PLLC Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Dringing con	Austin, TX 78701	İ	Employer (See Instructions			
	Fillicipal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/06/2024	Full name of contributor X Gainwell Holding Corp. Politic Contributor address; City; State;				Amount of Contribution (\$)	\$2,000.00
	Principal occu	Conway, AR 72034 pation / Job title (See Instructions)		Employer (See Instructions			
	r illicipai occu	pation / 300 title (See Instructions)		Employer (See manuchons	,		
	Date 12/06/2024	Full name of contributor X General Motors Political Actio Contributor address; City; State; Washington, DC 20001		076810)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor Grant, Kathy Contributor address; City; State; Austin, TX 78704	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$300.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			I				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	_E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 5/13 Rpt: 9/33	
2	FILER NAME Orr, Angelia	Duke (The Honorable)		3	Filer ID (Ethics Commission 00085955	on Filers)
4	Date 12/06/2024	5 Full name of contributor out-of-state PAC (ID#: HCA Texas Good Government Fund 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
_	· · · · · · · · · · · · · · · · · ·	Dallas, TX 75240		_		
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#: HOMEPAC of the Texas Association of Builder Contributor address; City; State; Zip Code	s		Amount of Contribution (\$)	\$250.00
	Principal occu	Austin, TX 78701 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#: Hochheim Prairie Political Action Committee Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occi	Yoakum, TX 77995 upation / Job title (See Instructions)	Employer (See Instructions	<u>s)</u>		
		pation (coo mondotono)	Employer (GGG misu asusins	·)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#: Houston Police Retired Officers Assn Political A Contributor address; City; State; Zip Code Houston, TX 77219	Action Committee		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#: Husch Blackwell LLP Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	St. Louis, MO 63105 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/13 Rpt: 10/33	
2	FILER NAME Orr, Angelia	Duke (The Honorable)		3	Filer ID (Ethics Commission 00085955	n Filers)
4	Date 12/06/2024	 Full name of contributor out-of-state PAC (ID#:_ Husch Blackwell Strategies Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00
g	Principal occu	Jefferson City, MO 65101 pation / Job title (See Instructions)	Employer (See Instructions			
0	Fillicipal occu	oation / Job title (See instructions)	e Employer (See instructions)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ IBAT Political Action Committee Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Delinational	Austin, TX 78701	Faralassa (Osas Instructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#: INDEPAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78750				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/06/2024	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Benbrook, TX 76126 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#: Linebarger Goggan Blair & Sampson LLP Contributor address; City; State; Zip Code Austin, TX 78760)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDUI	SCHEDULE A1	
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/13 Rpt: 11/33	
2	FILER NAME Orr. Angelia	Duke (The Honorable)		3	Filer ID (Ethics Commission 00085955	on Filers)
4	Date 12/09/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$250.00
8	Principal occu	Austin, TX 78703 pation / Job title (See Instructions)	Employer (See Instructions			
Ü	i illicipai occu	odition / Job title (See Instructions)	2 Employer (See instructions	,		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ Moak Casey Political Action Committee Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Austin, TX 78746				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/06/2024	Full name of contributor x out-of-state PAC (ID#: C00075341) Motorola Solutions, Inc. Political Action Committee Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Washington, DC 20004				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Norton, Jo Betsy Contributor address; City; State; Zip Code West Lake Hills, TX 78746)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_ Nucor Corporation Political Action Committee of Contributor address; City; State; Zip Code Jewett, TX 75846			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/13 Rpt: 12/33		
2	FILER NAME Orr, Angelia	Duke (The Honorable)		3	Filer ID (Ethics Commission 00085955	on Filers)	
4	Date 11/12/2024	Oncor Texas State Political Action Committee 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,500.00	
_		Dallas, TX 75202					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 12/06/2024	Full name of contributor x out-of-state PAC (ID#: C PNM Responsible Citizens Group Political Action Contributor address; City; State; Zip Code Albuquerque, NM 87158			Amount of Contribution (\$)	\$500.00	
	Principal occupation / Job title (See Instructions) Employer (See Instructions))			
	Date 12/06/2024	Full name of contributor	00469205		Amount of Contribution (\$)	\$1,000.00	
		Sunrise, FL 33323					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_ Provider Coalition For Care Political Action Com Contributor address; City; State; Zip Code Lewisville, TX 75057			Amount of Contribution (\$)	\$5,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_ Red Rock Texas Political Action Committee Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL C	ONTRIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 9/13 Rpt: 13/33	
2	FILER NAME	Duke (The Honorable)			3	Filer ID (Ethics Commission 00085955	on Filers)
_					Ļ		
4	Date 12/06/2024	5 Full name of contributor [Robison, Douglass (Mr.)6 Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)	/	Amount of Contribution (\$)	\$1,000.00
		Abilene, TX 79605					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	()		
	Founder & P	resident		Natural Resources			
	Date 11/22/2024	Full name of contributor [Siddons, Bill (Mr.) Contributor address; City; Sta)		Amount of Contribution (\$)	\$250.00
		Hillsboro, TX 76645					
	_	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Owner			Hill County Insurance			
	Date 11/22/2024	Full name of contributor [Swilling, Susan (Ms.) Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)		Amount of Contribution (\$)	\$200.00
		Whitney, TX 76692					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/09/2024	Full name of contributor TBA Bank PAC - State Contributor address; City; Sta Austin, TX 78701	out-of-state PAC (ID#: ite; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/06/2024	Full name of contributor Tex-Pipe Political Action C Contributor address; City; Sta Austin, TX 78701				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
			-				

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/13 Rpt: 14/33	
2	FILER NAME Orr, Angelia	Duke (The Honorable)		3	Filer ID (Ethics Commission 00085955	on Filers)
4			7	Amount of Contribution (\$)	\$700.00	
_		Austin, TX 78741				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#: Texas Alliance for Conservation Political Action Contributor address; City; State; Zip Code Austin, TX 78703			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Ambulatory Surgery Center Society - Poli Contributor address; City; State; Zip Code	tical Action Committee		Amount of Contribution (\$)	\$500.00
	Dein sin al a ser	Austin, TX 78701	Farabasa (Osabasa disa			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Association of Health Plans Political Action Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Cornerstone Credit Union League Politica Contributor address; City; State; Zip Code Dallas, TX 75265	l Action Committee		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 11/13 Rpt: 15/33		
2	FILER NAME Orr, Angelia	Duke (The Honorable)			3	Filer ID (Ethics Commission 00085955	on Filers)
4	Date 11/01/2024	 5 Full name of contributor Texas Dairymen Political Actio 6 Contributor address; City; State; 2 			7	Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78711					
8	Principal occu	pation / Job title (See Instructions)	Ş	Employer (See Instructions)		
	Date 11/22/2024	Texas Dental Association Poli Contributor address; City; State; 2				Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78704 pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/06/2024	Full name of contributor Texas Homecare & Hospice P Contributor address; City; State; 2 Austin, TX 78759				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/06/2024	Full name of contributor Texas Land Title Association F Contributor address; City; State; 2 Austin, TX 78703				Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/06/2024	Texas Medical Association Po				Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			'				

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instru	ction Guide explains how to comp	olete this fo	rm.	1	Total pages Schedule A1: Sch: 12/13 Rpt: 16/33		
2	FILER NAME Orr, Angelia	Duke (The Honorable)			3	Filer ID (Ethics Commission 00085955	on Filers)	
4	Date 11/12/2024	 Full name of contributor out-of-st Texas Mortgage Bankers Political A Contributor address; City; State; Zip Cod 			7	Amount of Contribution (\$)	\$1,500.00	
		Austin, TX 78701						
8	Principal occu	pation / Job title (See Instructions)	ξ	Employer (See Instructions)			
Date Full name of contributor out-of-state PAC (ID#:) 12/10/2024 Texas Physicians For Patients Political Action Committee Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00				
	Principal occu	Marble Falls, TX 78654 pation / Job title (See Instructions)		Employer (See Instructions)			
	Date 12/09/2024	Full name of contributor out-of-st Texas Sands Political Action Comm Contributor address; City; State; Zip Cod)		Amount of Contribution (\$)	\$4,000.00	
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions)			
	Date 12/06/2024	Full name of contributor out-of-st Texas Statewide Telephone Cooper Contributor address; City; State; Zip Coo Austin, TX 78701				Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)			
	Date 11/22/2024	Full name of contributor x out-of-st The Home Depot Political Action Co Contributor address; City; State; Zip Coo Washington, DC 20004		00284885)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)			

MONETARY POLITICAL CONTRIBUTIONS			NS		SCHEDUI	ULE A1	
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 13/13 Rpt: 17/33		
2	FILER NAME Orr, Angelia	Duke (The Honorable)		3	Filer ID (Ethics Commission 00085955	on Filers)	
4	Date 12/09/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00	
_	Deignaignal	Austin, TX 78701	O Familia van (Can Imphris phia pa				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#: USAA Employee Political Action Committee Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00	
		San Antonio, TX 78288					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 11/11/2024	Full name of contributor X out-of-state PAC (ID#: C UnitedHealth Group Political Action Committee Contributor address; City; State; Zip Code	00274431)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Washington, DC 20004 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 11/12/2024	Full name of contributor out-of-state PAC (ID#:_ Weekley, Richard (Mr.) Contributor address; City; State; Zip Code Houston, TX 77027			Amount of Contribution (\$)	\$1,500.00	
	Principal occu Chairman	pation / Job title (See Instructions)	Employer (See Instructions Weekley Development (mpany		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#: Wholesale Beer Distributors of Texas Political Ac Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
		I					

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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		vel Out of District HER (enter a category not listed above)
		· · · · · · · · · · · · · · · · · · ·	
1	Total pages Schedule F1: Sch: 1/8 Rpt: 18/33		er ID (Ethics Commission Filers) 085955
4	Date	5 Payee name	
	12/12/2024	Amazon	
	12/12/2024		
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$510.72	410 Terry Ave. N	
		Seattle, WA 98109-5210	
Ļ	DUDDOGE	 	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Event Expense Check if travel outside of Check if Austin, TX, office	Texas. Complete Schedule T.
			ations for fundraiser (reimburse
		LK)	ations for fundraiser (reimburse
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experiulture to benefit C/Oi) I	
	Date	Payee name	
	10/29/2024	Campaign Reporting Solutions LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$484.50		
	\$484.50	110 Carriage Drive	
		Lufkin, TX 75904	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, offic	eholder living expense
		Campaign bookkee	ping services
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	DH	
H	Date	Payee name	
		1 '	
	12/08/2024	Capitol Extension Gift Shop	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$714.45	1400 Congress Avenue	
		Ste. E1.006	
		Austin, TX 78701	
	PURPOSE	1	
	OF	, , , , , , , , , , , , , , , , , , ,	Texas. Complete Schedule T.
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Check if Austin, TX, office	·
		Constituent gifts	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Cindo Hold

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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Credit Card Payment	The Instruction Guide explains how to co	omple	ete this form.
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 2/8 Rpt: 19/33	Orr, Angelia Duke (The Honorable)		00085955
4 Date	5 Payee name		•
11/14/2024	Cooper, Nicholas		
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode	
\$1,171.83	2118 DeMilo Drive		
	Houston, TX 77018		
8 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
			Political mileage. Log maintained in the campaign
			office (1749m*0.67). Not reimbursed by the state.
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ught	Office held
expenditure to benefit C/O	Н		
Date	Payee name		
11/14/2024	Cooper, Nicholas		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$20.00	2118 DeMilo Drive		
	Houston, TX 77018		
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
			Reimbursement for COG luncheon
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught	Office held
expenditure to benefit C/O	H		
Date	Payee name		
12/09/2024	Cooper, Nicholas		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$1,000.00	2118 DeMilo Drive		
	Houston, TX 77018		
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 contract labor
			-
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught	Office held
expenditure to benefit C/O	H		
	н		

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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
_	Sch: 3/8 Rpt: 20/33	Orr, Angelia Duke (The Honorable)
4	Date	5 Payee name
	11/05/2024	Humphries, Lynne
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,381.00	1515 Savannah Drive
		Richmond, TX 77406
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.
		X Check if Austin, TX, officeholder living expense Rent for political apartment maintained in Austin
		Nent for political apartment maintained in Austin
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
L		
	Date	Payee name
	12/03/2024	Humphries, Lynne
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,381.00	1515 Savannah Drive
		Richmond, TX 77406
	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. X Check if Austin, TX, officeholder living expense
		X Check if Austin, TX, officeholder living expense Rent for political apartment maintained in Austin
		Trent for pointed apartment maintained in ridesin
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/12/2024	Kimbrell, Lindsay
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,303.82	330 HCR 1355
	,	
		Itasca, TX 76055
	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
		Political mileage. Log maintained in the campaign office (1946m*0.67). Not reimbursed by the state.
	Complete ONLY if alias -t	
	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 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: 4/8 Rpt: 21/33	Orr, Angelia Duke (The Honorable) 00085955	
4	Date	5 Payee name	_
	12/09/2024	Kimbrell, Lindsay	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
l	\$1,000.00	330 HCR 1355	
l			
l		Itasca, TX 76055	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
l	OF EXPENDITURE	Salaries/Wages/Contract Labor	
		Campaign contract labor	
		Campaign contract labor	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
ľ	expenditure to benefit C/O		
⊨	Date	Payee name	=
	12/30/2024	Murphy Nasica	
⊢	Amount (\$)	Payee address; City; State; Zip Code	_
l	\$33.28	PO Box 1648	
	400.20	1 0 20/12 10	
		Austin, TX 78767	
┝	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.	
l	EXPENDITURE	Check if Austin, TX, officeholder living expense	
l		Campaign email hosting	
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
┕	•		_
l	Date	Payee name	
L	12/30/2024	Murphy Nasica	
l	Amount (\$)	Payee address; City; State; Zip Code	
l	\$2,832.81	PO Box 1648	
L		Austin, TX 78767	
l	PURPOSE 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.	
l	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
l		Design, printing and mailing of campaign fundraisin	g
l		invitations	
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/Ol	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 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 com	plete this form.
1	Total pages Schedule F1: Sch: 5/8 Rpt: 22/33	FILER NAME Orr, Angelia Duke (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085955
4	Date 12/30/2024	5 Payee name Murphy Nasica	
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 1648	9
		Austin, TX 78767	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political consulting - campaign services (Sept)
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	nt Office held
	Date 12/30/2024	Payee name Murphy Nasica	
	Amount (\$) \$500.00	Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767	e
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political consulting - campaign services (Oct)
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	nt Office held
	Date 12/30/2024	Payee name Murphy Nasica	
	Amount (\$) \$500.00	Payee address; City; State; Zip Code PO Box 1648	9
		Austin, TX 78767	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	D) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political consulting - campaign services (Nov)
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	nt 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 (Contract Labor,

	Credit Card Payment	The Instruction Guide explains how to con	•	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 6/8 Rpt: 23/33	Orr, Angelia Duke (The Honorable)		00085955
4	Date	5 Payee name		<u> </u>
	12/30/2024	Murphy Nasica		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$500.00	PO Box 1648		
		Austin, TX 78767		
8	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.
	EXPENDITORE			Check if Austin, TX, officeholder living expense
				Political consulting - campaign services (Dec)
_				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght	Office held
	Date	Payee name		
	11/07/2024	Norfleet Strategies		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$500.00	504 W 12th Street		
		Austin, TX 78701		
	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
				Political consulting - campaign services
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI		,,,,	Office field
	Date	Davis name		
	12/11/2024	Payee name Norfleet Strategies		
			40	
	Amount (\$) \$500.00	Payee address; City; State; Zip Coo 504 W 12th Street	Jе	
	φ500.00	304 W 12th Street		
		Aughin TV 70701		
		Austin, TX 78701		
	PURPOSE OF	, , ,	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Consulting Expense		Check if Austin, TX, officeholder living expense
				Political consulting - campaign services
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	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

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: 7/8 Rpt: 24/33	Orr, Angelia Duke (The Honorable)
4	Date	5 Payee name
	12/09/2024	Reagan, Jacob
6	Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code 14920 Talus Road
	. ,	
		Manor, TX 78653
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 contract labor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
	Date	Payee name
	12/09/2024	Reagan, Jacob
	Amount (\$)	Payee address; City; State; Zip Code
	\$828.12	14920 Talus Road
		Manor, TX 78653
	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 Political mileage. Log maintained in the campaign
		office (1236m*0.67). Not reimbursed by the state.
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/25/2024	Westgate Condominium Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$164.00	1122 Colorado Street
		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.
		X Check if Austin, TX, officeholder living expense
		Utilities for political apartment maintained in Austin
_	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

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Consuling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	- Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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: 8/8 Rpt: 25/33	Orr, Angelia Duke (The Honorable) 00085955
4	Date	5 Payee name
	12/30/2024	Westgate Condominium Association
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$150.00	1122 Colorado Street
		Austin, TX 78701
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.
		X Check if Austin, TX, officeholder living expense
		Utilities for political apartment maintained in Austin
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
l		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************		· · · · · ·
1 Total pages Schedule F4:	1: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 1/7 Rpt: 26/33	Orr, Angelia Duke (The Honorable)			00085955			
4 CREDIT CARD ISSUER		ncial institution n Express	EXPEN	OF UNITEMIZED DITURES GED TO A CREDIT	\$	\$ 498.03	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$377.62	11/06/2024					
7 PAYEE	(a) Payee name Overflow Coffee Co			City,	City, State, Zip Code		
8 PURPOSE OF	(a) Category		+	, TX 76645			
EXPENDITURE X Political	(See Categories listed at the top Event Expense	of this schedule)	(b) Description Food and location for campaign event				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
TAIMEN	\$18.83	11/13/2024	(c) Date(s)	Cicuit Card 133del	Talu		
PAYEE (a) Payee name (b) Payee			(b) Payee	address;	City,	State,	Zip Code
	Uber		1455 Market Street Ste. 400 San Francisco, CA 94103				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Ride-sharing costs to attend OH meetings				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$3.78	(b) Date of Charge 11/13/2024	(c) Date(s)) Credit Card Issuel	r Paid		
PAYEE	(a) Payee name Uber		Ste. 400	address; rket Street ncisco, CA 94103	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	1 ` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			otion ring costs to atte	nd OH meeting	S	
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	l						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	Total pages Schedule F4: 2 FILER NAME			3 File	3 Filer ID (Ethics Commission Filers)		
	Sch: 2/7 Rpt: 27/33	Orr, Angelia Duke (The Honorable)			00085	00085955		
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITE EXPENDITURES CHARGED TO A G CARD	\$	498.	.03	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Ca	rd Issuer Paid			
		\$21.60	11/13/2024					
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
		Uber		1455 Market Stree	t			
		Obei		Ste. 400				
L				San Francisco, CA	94103			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description				
	EXPENDITURE	Travel Out of District	of this scriedule)	Ride-sharing costs	to attend OH	meetings		
	X Political							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if A	Austin, TX, officeholde	er living expense		
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office	held		
€	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Ca	rd Issuer Paid			
		\$3.24	11/18/2024					
H	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
				1455 Market Stree	t			
		Uber		Ste. 400				
				San Francisco, CA 94103				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Ride-sharing costs to attend OH meetings				
	X Political	Travel Out of District						
L	Non-Political	· · · —	of Texas. Complete Schedule T.		Austin, TX, officeholde			
۱,	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office	held		
H	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Ca	rd Issuer Paid			
		\$11.60	12/02/2024	(0) = 1110(0) = 11111				
Г	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
		1455 Market Stree	t					
	Uber Ste. 400							
				San Francisco, CA	94103			
	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE (See Categories listed at the top of this schedule) Travel Out of District		Ride-sharing costs	to attend OH	meeting			
X Political Travel Out of District								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if	Austin, TX, officeholde	er living expense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office	held		
E	expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

l	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
l	Sch: 3/7 Rpt: 28/33	Orr, Angelia Duke (The Honorable)			00085955			
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF U EXPENDITU CHARGED T CARD	RES	\$ 498.03		03
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer		Paid		
		\$21.60	12/04/2024					
7	PAYEE	(a) Payee name	ee name (b) Payee address;		City,	State,	Zip Code	
l		Uber		1455 Market S	Street			
l		Obei		Ste. 400				
L				San Francisco	o, CA 94103			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cohodulo)	(b) Description				
l	EXPENDITURE	Travel Out of District	of this scriedule)	Ride-sharing	costs to atter	nd OH meeting	S	
l	X Political							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Cr	neck if Austin, TX,	officeholder living expe	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
E	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cred	lit Card Issuer	Paid		
		\$24.84	12/04/2024					
PAYEE (a) Payee name (b) Payee address;			ess;	City,	State,	Zip Code		
				1455 Market S	Street			
		Uber		Ste. 400				
				San Francisco, CA 94103				
Г	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Ride-sharing costs to attend OH meetings				
l	X Political	Traver Out of District						
l	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Cr	neck if Austin, TX,	K, officeholder living expense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
€	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cred	lit Card Issuer	Paid		
l		\$3.24	12/05/2024					
l								
	PAYEE	(a) Payee name		(b) Payee addre	ess;	City,	State,	Zip Code
	1455 Market Str		Street					
	Uber Ste. 400							
				San Francisco	o, CA 94103			
	PURPOSE OF (a) Category			(b) Description				
	EXPENDITURE (See Categories listed at the top of this schedule) Travel Out of District		Ride-sharing costs to attend OH meetings					
X Political Travel Out of District								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Cr	neck if Austin, TX,	officeholder living expe	ense	
Г	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
E	expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete th	is form.			
1 Total pages Schedule F4:	es Schedule F4: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 4/7 Rpt: 29/33	Orr, Angelia Duke (The Honorable)			00085955			
4 CREDIT CARD ISSUER	Name of financial institution See previous 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	Paid		
	\$24.84	12/05/2024					
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Uber		1455 Mark Ste. 400 San Franc	et Street isco, CA 94103			
8 PURPOSE OF	(a) Category		(b) Descripti	on			
EXPENDITURE X Political	(See Categories listed at the top of this schedule) Travel Out of District Ride-sharing costs to atten			nd OH meeting	IS		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	r name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid		
	\$21.60	12/05/2024					
PAYEE (a) Payee name			(b) Payee a	ddress;	City,	State,	Zip Code
	Liber		1455 Market Street				
	Uber		Ste. 400				
			San Francisco, CA 94103				
PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodule)	(b) Descripti				
EXPENDITURE 	Travel Out of District	of this schedule)	Ride-sharing costs to attend OH meetings				
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	x, officeholder living expense		
Complete ONLY if direct	Candidate/Officeholder	r name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid		
	\$24.84	12/05/2024					
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
			1455 Market Street				
	Uber		Ste. 400				
			San Franc	isco, CA 94103			
PURPOSE OF				(b) Description			
EXPENDITURE	RE (See Categories listed at the top of this schedule) Travel Out of District			ng costs to atte	nd OH meeting	IS	
X Political							
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct	Candidate/Officeholder	r name Office	e sought		Office held		
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete t	his form.			
1	Total pages Schedule F4:	: 2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)
	Sch: 5/7 Rpt: 30/33	Orr, Angelia Duke (The Honorable)			00085955			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$ 498.03		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$21.60	12/06/2024					
7	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		Uber		Ste. 400	ket Street cisco, CA 94103	1		
8	PURPOSE OF	(a) Category		(b) Descrip	ntion			
	EXPENDITURE X Political	(See Categories listed at the top Travel Out of District	of this schedule)	Ride-sharing costs to attend OH meetings				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$24.84	12/06/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Libor		1455 Mai	ket Street			
		Uber		Ste. 400				
				<u> </u>	cisco, CA 94103	}		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this echodulo)	(b) Descrip				
	_	Travel Out of District	or triis scriedule)	Ride-sharing costs to attend OH meetings				
	X Political							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	c, officeholder living expense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$3.24	12/11/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
				1455 Mai	ket Street			
		Uber		Ste. 400				
				San Fran	cisco, CA 94103	3		
	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Ride-sha	ring costs to atte	nd OH meeting	js –	
	X Political	al Traver Sat of Bistrict						
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	xpenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

l	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	4: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
	Sch: 6/7 Rpt: 31/33	Orr, Angelia Duke (The Honorable)			00085955			
4	CREDIT CARD ISSUER		ncial institution revious	EXPENDI	UNITEMIZED TURES TO A CREDIT	\$	498.0)3
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	Paid		
		\$39.90	12/11/2024					
7	PAYEE	(a) Payee name		(b) Payee ad	dress;	City,	State,	Zip Code
l		Uber		1455 Marke	et Street			
l		Obei		Ste. 400				
L				<u> </u>	sco, CA 94103			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cohodulo)	(b) Description				
	EXPENDITURE	Travel Out of District	of this scriedule)	Ride-sharin	g costs to atte	nd OH meeting	js	
	X Political							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
E	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	Paid		
		\$225.12	12/11/2024					
Г	PAYEE (a) Payee name (b) Payee address;			dress;	City,	State,	Zip Code	
		Tiny Boxwoods		1503 W 35	h Street			
				Austin, TX	78703			
	PURPOSE OF	(a) Category		(b) Description				
l	EXPENDITURE	(See Categories listed at the top	*	OH lunch meeting				
	X Political	Food/Beverage Expe	1156					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	, officeholder living expense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	-	Office held		
E	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	Paid		
		\$38.29	12/12/2024					
H	PAYEE	(a) Payee name	l	(b) Payee ad	dress;	City,	State,	Zip Code
				1455 Marke	et Street			
	Uber Ste. 400							
				San Francis	sco, CA 94103			
Г	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE (See Categories listed at the top of this schedule)		Ride-sharin	g costs to atte	nd OH meeting	js		
	X Political	Travel Out of District						
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
E	expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F4:	Total pages Schedule F4: 2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
Sch: 7/7 Rpt: 32/33	Orr, Angelia Duke (The Honorable)			00085955			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	T	98.03		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid			
	\$17.87	12/12/2024					
7 PAYEE	(a) Payee name (b) Payee address;			City, Sta	ite, Zip Code		
	Uber		1455 Market Street				
	l oper		Ste. 400				
			San Francisco, CA 94103				
8 PURPOSE OF							
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Ride-sharing costs to atte	nd OH meetings			
X Political	Traver out or District						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid			
	\$16.87	12/12/2024					
PAYEE (a) Payee name (b) Payee			(b) Payee address;	City, Sta	ite, Zip Code		
			1455 Market Street				
	Uber		Ste. 400				
			San Francisco, CA 94103				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Ride-sharing costs to attend OH meetings				
X Political	Travel Out of District						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid			
	\$72.37	12/19/2024					
PAYEE	(a) Payee name	l	(b) Payee address;	City, Sta	ite, Zip Code		
			1000 E 41st Street				
Spectrum		Ste. 920					
			Austin, TX 78751				
PURPOSE OF	(a) Category	(b) Description					
EXPENDITURE (See Categories listed at the top of this schedule)			WIFI and internet for political apartment maintained in				
X Political	Fees Austin						
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. X Check if Austin, TX, officeholder living expense						
Complete ONLY if direct	Candidate/Officeholder	name Office	e 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 Consulting Expense

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	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 G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
	Sch: 1/1 Rpt: 33/33	Orr, Angelia Duke (The Honorable)	00085955		
4	Date	5 Payee name			
	10/27/2024	American Express			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$525.26	PO Box 6031			
	Reimbursement from political contributions				
	intended	Carol Stream, IL 60197			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	Check if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE	Credit Card Payment	Check if Austin, TX, officeholder living expense		
		Credit card paym F4 of prior report	nent for items properly reported on Sch		
9		Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OH				
	Date	Payee name			
	11/23/2024	American Express			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$240.16	PO Box 6031			
	Reimbursement from political contributions intended	Carol Stream, IL 60197			
	PURPOSE	Category (See Categories listed at the top of this schedule) Description	Check if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE		Credit Card Payment	Check if Austin, TX, officeholder living expense		
		Credit card paym F4 of prior report	nent for items properly reported on Sch		
		Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OH				
	Date	Payee name			
	12/23/2024	American Express			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$853.32	PO Box 6031			
	X Reimbursement from political contributions intended	Carol Stream, IL 60197			
	PURPOSE	Category (See Categories listed at the top of this schedule) Description	Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE Great Card Fayment			Check if Austin, TX, officeholder living expense		
		Credit card paym F4 of current rep	nent for items properly reported on Schort		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held		