

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers) 00081543		2 Total pages filed: 62		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Erin A.	MI MI	Date Received ELECTRONICALLY FILED 07/31/2025	
	NICKNAME	LAST Zwiener	SUFFIX	Date Hand-delivered or Date Postmarked	
4 ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	Receipt #	
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded modified reporting limit		Amount	
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		Date Processed	
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report (Attach C/OH-FR)		Date Imaged	
5 ORIGINAL PERIOD COVERED	Month Day Year 10/27/2024	THROUGH	Month Day Year 12/31/2024		

6 EXPLANATION OF CORRECTION

Two contributions were included on the original report with dates received 12/15/24. However, both contributions were received through ActBlue which exports contribution data with an Eastern Time date/timestamp. We mistakenly didn't convert the dates to the accurate Central Time. This amended report corrects the dates as follows:

Nicole Hefner \$25
12/14/2024 11:39pm

Curtis SerVaas \$1000
12/14/2024 11:55pm

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

☒ **Semiannual reports:** I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☒ **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

The Honorable Erin A. Zwiener

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

**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 complete this form.		1 Filer ID (Ethics Commission Filers) 00081543	2 Total pages filed: 62			
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Erin A.	MI MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/31/2025		
	NICKNAME	LAST Zwiener	SUFFIX			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE PO Box 184 Driftwood, TX 78619			Date Hand-delivered or Date Postmarked		
				Receipt # Amount		
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Zwiener	MI MI			
	NICKNAME	LAST Erin A.	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 900 S. Creekwood Dr. Driftwood, TX 78619					
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
	(512)	842-7173				
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month	Day	Year	Month	Day	Year
		10/27/2024		THROUGH		12/31/2024
10 ELECTION	ELECTION DATE		ELECTION TYPE			
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other
		11/05/2024		<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) State Representative District 45			12 OFFICE SOUGHT (if known) State Representative District 45		

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME	Zwiener, Erin A. (The Honorable)	14 Filer ID	(Ethics Commission Filers)
		00081543	

15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	50,873.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	650.17
	4. TOTAL POLITICAL EXPENDITURES	\$	31,178.31
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	51,501.05
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

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

The Honorable Erin A. Zwiener

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Zwiener, Erin A. (The Honorable)		19 Filer ID 00081543	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	50,873.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	31,178.31
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/44 Rpt: 5/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, JOHN <hr/> 6 Contributor address; City; State; Zip Code Dripping Springs, TX 78620-3962	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, JOHN <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620-3962	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, JOHN <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620-3962	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, JOHN <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620-3962	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AT&T Texas PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2471	Amount of Contribution (\$) \$1,000.00
Principal occupation / 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: 2/44 Rpt: 6/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allmon, Cecily <hr/> 6 Contributor address; City; State; Zip Code Johnson City, TX 78636-4167	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00040535) American Express PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20004-2673	Amount of Contribution (\$) \$1,250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apirian, Marilyn <hr/> Contributor address; City; State; Zip Code Arnold, MD 21012-2417	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BP North America Employee PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77079-2604	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baethge, Edwina <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-7686	Amount of Contribution (\$) \$10.00
Principal occupation / 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: 3/44 Rpt: 7/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baethge, Edwina <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78666-7686	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balcombe, April <hr/> Contributor address; City; State; Zip Code Austin, TX 78737-4531	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Martha <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-2016	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Shelley <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761-2234	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bentley Public Affairs <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-1828	Amount of Contribution (\$) \$100.00
Principal occupation / 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: 4/44 Rpt: 8/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boren, Ryan C. <hr/> 6 Contributor address; City; State; Zip Code Dripping Springs, TX 78620-3709	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boren, Ryan C. <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620-3709	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brentwood Public Affairs <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2102	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridge, Lynn <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620-3981	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridge, Lynn <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620-3981	Amount of Contribution (\$) \$10.00
Principal occupation / 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: 5/44 Rpt: 9/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Mandy <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78666-5474	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Mandy <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-5474	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Lillian <hr/> Contributor address; City; State; Zip Code Austin, TX 78702-2834	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Lillian <hr/> Contributor address; City; State; Zip Code Austin, TX 78702-2834	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Judith <hr/> Contributor address; City; State; Zip Code Buda, TX 78610-2513	Amount of Contribution (\$) \$40.00
Principal occupation / 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: 6/44 Rpt: 10/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/12/2024	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00002089) CWA COPE <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20001-2760	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Calderon, Sara Ines <hr/> Contributor address; City; State; Zip Code Austin, TX 78715-2548	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Camp, Dixie <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620-0163	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Carriker, Kathy D <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620-1113	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) Carriker, Kathy D <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620-1113	Amount of Contribution (\$) \$20.00
Principal occupation / 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: 7/44 Rpt: 11/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carriker, Kathy D <hr/> 6 Contributor address; City; State; Zip Code Dripping Springs, TX 78620-1113	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carriker, Kathy D <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620-1113	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carriker, Kathy D <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620-1113	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassidy, Cindy & John <hr/> Contributor address; City; State; Zip Code Driftwood, TX 78619-4242	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cemo, Jason <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-1531	Amount of Contribution (\$) \$25.00
Principal occupation / 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: 8/44 Rpt: 12/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 10/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Deborah <hr/> 6 Contributor address; City; State; Zip Code Buda, TX 78610-3838	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Deborah <hr/> Contributor address; City; State; Zip Code Buda, TX 78610-3838	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Home <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620-4329	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Close, Eleanor <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-2298	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Close, Eleanor <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-2298	Amount of Contribution (\$) \$25.00
Principal occupation / 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: 9/44 Rpt: 13/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Close, Eleanor 6 Contributor address; City; State; Zip Code San Marcos, TX 78666-2298	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colburn, Laura Contributor address; City; State; Zip Code Austin, TX 78737-4858	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colburn, Laura Contributor address; City; State; Zip Code Austin, TX 78737-4858	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colburn, Laura Contributor address; City; State; Zip Code Austin, TX 78737-4858	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coldsmith, April Contributor address; City; State; Zip Code San Marcos, TX 78666-9461	Amount of Contribution (\$) \$15.00
Principal occupation / 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: 10/44 Rpt: 14/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connell, Ann <hr/> 6 Contributor address; City; State; Zip Code Driftwood, TX 78619-0039	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connolly, Leo <hr/> Contributor address; City; State; Zip Code Laguna Niguel, CA 92677-1830	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78746-4115	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78746-4115	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Susan <hr/> Contributor address; City; State; Zip Code Driftwood, TX 78619-9151	Amount of Contribution (\$) \$100.00
Principal occupation / 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: 11/44 Rpt: 15/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Cody <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78666-5478	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Cody <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-5478	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis Kaufman PLLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-1724	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delisi Communications PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-1720	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Demand, Melissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78737-4525	Amount of Contribution (\$) \$50.00
Principal occupation / 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: 12/44 Rpt: 16/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doerr, David <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703-5338	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donovan, Anne <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-1743	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Patty <hr/> Contributor address; City; State; Zip Code Johnson City, TX 78636-1504	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Patty <hr/> Contributor address; City; State; Zip Code Johnson City, TX 78636-1504	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Patty <hr/> Contributor address; City; State; Zip Code Johnson City, TX 78636-1504	Amount of Contribution (\$) \$50.00
Principal occupation / 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: 13/44 Rpt: 17/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Patty <hr/> 6 Contributor address; City; State; Zip Code Johnson City, TX 78636-1504	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Nancy <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-2904	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Mary Ellen <hr/> Contributor address; City; State; Zip Code Austin, TX 78745-2084	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Mary Ellen <hr/> Contributor address; City; State; Zip Code Austin, TX 78745-2084	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FitzPatrick, Shannon <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78667-0832	Amount of Contribution (\$) \$25.00
Principal occupation / 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: 14/44 Rpt: 18/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FitzPatrick, Shannon <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78667-0832	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frohlich, Penelope <hr/> Contributor address; City; State; Zip Code Austin, TX 78737-9051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frohlich, Penelope <hr/> Contributor address; City; State; Zip Code Austin, TX 78737-9051	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Yolanda <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-5367	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaboury, Matt <hr/> Contributor address; City; State; Zip Code South Bend, IN 46614-3531	Amount of Contribution (\$) \$1.00
Principal occupation / 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: 15/44 Rpt: 19/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaboury, Matt <hr/> 6 Contributor address; City; State; Zip Code South Bend, IN 46614-3531	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaddis, Marilyn Tyler <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-1110	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaddis, Marilyn Tyler <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-1110	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galaviz, Abel <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-5036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Mark <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-6120	Amount of Contribution (\$) \$25.00
Principal occupation / 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: 16/44 Rpt: 20/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Mark <hr/> 6 Contributor address; City; State; Zip Code Kyle, TX 78640-6120	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Mark <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-6120	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Mark <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-6120	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Mark <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-6120	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, Gary <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-3029	Amount of Contribution (\$) \$50.00
Principal occupation / 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: 17/44 Rpt: 21/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glosoff, Harriet 6 Contributor address; City; State; Zip Code Kyle, TX 78640-6131	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gondol, John Contributor address; City; State; Zip Code Holly Lake Ranch, TX 75765-7179	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gondol, John Contributor address; City; State; Zip Code Holly Lake Ranch, TX 75765-7179	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodson, Paula Contributor address; City; State; Zip Code Buda, TX 78610-3223	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grant, Jonathan Contributor address; City; State; Zip Code San Marcos, TX 78666-7630	Amount of Contribution (\$) \$25.00
Principal occupation / 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: 18/44 Rpt: 22/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grant, Kathy <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704-4131	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Susan <hr/> Contributor address; City; State; Zip Code Buda, TX 78610-3850	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gullickson, Douglas <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2853	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gullickson, Douglas <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2853	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HCA Texas Good Government Fund <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-5398	Amount of Contribution (\$) \$500.00
Principal occupation / 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: 19/44 Rpt: 23/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HMWK LLC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701-1810	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOMEPAC Of Texas <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagemeier, Cookie <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676-1971	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Jimmy <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676-5025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Paul <hr/> Contributor address; City; State; Zip Code Austin, TX 78727-6870	Amount of Contribution (\$) \$10.00
Principal occupation / 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: 20/44 Rpt: 24/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Paul 6 Contributor address; City; State; Zip Code Austin, TX 78727-6870	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haschke, Donna Contributor address; City; State; Zip Code Buda, TX 78610-2827	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haschke, Gerald Contributor address; City; State; Zip Code Buda, TX 78610-2827	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hefner, Nicole Contributor address; City; State; Zip Code San Marcos, TX 78666-8042	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Kelly Contributor address; City; State; Zip Code Austin, TX 78727-6416	Amount of Contribution (\$) \$5.00
Principal occupation / 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: 21/44 Rpt: 25/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Kelly <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78727-6416	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hess, Myron <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-2121	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hiller <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hiller, Jay <hr/> Contributor address; City; State; Zip Code Austin, TX 78726-1375	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holman, Sully <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-3636	Amount of Contribution (\$) \$10.00
Principal occupation / 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: 22/44 Rpt: 26/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horton, Corey <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78737-1012	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Husch Blackwell LLP <hr/> Contributor address; City; State; Zip Code Saint Louis, MO 63105-1706	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INDEPAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78750-2228	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Independent Bankers Association of Texas PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-1683	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Insley, Diane <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-2840	Amount of Contribution (\$) \$50.00
Principal occupation / 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: 23/44 Rpt: 27/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ishibashi, Susie <hr/> 6 Contributor address; City; State; Zip Code Kyle, TX 78640-6513	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Lucy <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-2234	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufmann, Jeffrey <hr/> Contributor address; City; State; Zip Code Buda, TX 78610-2613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaura, Jana <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620-3943	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kidd, Shauna <hr/> Contributor address; City; State; Zip Code Austin, TX 78737-8803	Amount of Contribution (\$) \$10.00
Principal occupation / 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: 24/44 Rpt: 28/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kling, Kelsey Altom <hr/> 6 Contributor address; City; State; Zip Code Dripping Springs, TX 78620-3962	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kosch, Kevin <hr/> Contributor address; City; State; Zip Code Buda, TX 78610-2093	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laumer, Diane <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-2270	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leatherwood, Rob <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-3845	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liddle, Melanie <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-4920	Amount of Contribution (\$) \$25.00
Principal occupation / 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: 25/44 Rpt: 29/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Googgan Blair & Sampson LLP <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78760-7428	7 Amount of Contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger, Dale <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-3137	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liu, Dan <hr/> Contributor address; City; State; Zip Code Austin, TX 78737-4475	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loewy, Adam Jacob <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-3013	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Law		Employer (See Instructions) Loewy Law Firm
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Gordy <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-5088	Amount of Contribution (\$) \$50.00
Principal occupation / 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: 26/44 Rpt: 30/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maguire-Powell, Alison <hr/> 6 Contributor address; City; State; Zip Code Denton, TX 76210-4637	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maguire-Powell, Alison <hr/> Contributor address; City; State; Zip Code Denton, TX 76210-4637	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manassian, Taline <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620-3794	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangan, Karen <hr/> Contributor address; City; State; Zip Code Blanco, TX 78606-1656	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangan, Karen <hr/> Contributor address; City; State; Zip Code Blanco, TX 78606-1656	Amount of Contribution (\$) \$10.00
Principal occupation / 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: 27/44 Rpt: 31/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Virginia <hr/> 6 Contributor address; City; State; Zip Code Kyle, TX 78640-2226	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Virginia <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-2226	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinv-Valenta, Katrina <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-2454	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathis, Kate <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-6458	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matlock, Ann <hr/> Contributor address; City; State; Zip Code Johnson City, TX 78636-4140	Amount of Contribution (\$) \$25.00
Principal occupation / 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: 28/44 Rpt: 32/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matlock, Ann <hr/> 6 Contributor address; City; State; Zip Code Johnson City, TX 78636-4140	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matz and Company LLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-3931	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Carol <hr/> Contributor address; City; State; Zip Code Cypress Mill, TX 78663-8606	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Carol <hr/> Contributor address; City; State; Zip Code Cypress Mill, TX 78663-8606	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLarty, Davis <hr/> Contributor address; City; State; Zip Code Austin, TX 78745-0013	Amount of Contribution (\$) \$50.00
Principal occupation / 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: 29/44 Rpt: 33/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McQueen, Penley <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78748-3908	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jennifer <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620-3124	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Kim <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-9229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moak Casey PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-5002	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newlan, Nichole <hr/> Contributor address; City; State; Zip Code Austin, TX 78737-4529	Amount of Contribution (\$) \$25.00
Principal occupation / 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: 30/44 Rpt: 34/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newlan, Nichole <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78737-4529	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman, Harry <hr/> Contributor address; City; State; Zip Code Austin, TX 78737-1469	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newton, Monica <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620-5316	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuss, Melynda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-5056	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuss, Melynda <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-5056	Amount of Contribution (\$) \$15.00
Principal occupation / 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: 31/44 Rpt: 35/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogletree, Shirley <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78666-3134	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearce, Gayla <hr/> Contributor address; City; State; Zip Code Marble Falls, TX 78654-9767	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perri, Shannon <hr/> Contributor address; City; State; Zip Code Austin, TX 78745-6825	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PharmPAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78757-8034	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poinset PLLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2100	Amount of Contribution (\$) \$500.00
Principal occupation / 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: 32/44 Rpt: 36/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollard, Gareth <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78737-9030	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00498105) Prime Therapeutics LLC Employee State PAC <hr/> Contributor address; City; State; Zip Code Eagan, MN 55121-1204	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randy Lee Public Affairs LLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78767-1806	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Red Rock Texas PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2114	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riceland Consulting LLC <hr/> Contributor address; City; State; Zip Code Eagle Lake, TX 77434-7286	Amount of Contribution (\$) \$250.00
Principal occupation / 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: 33/44 Rpt: 37/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rigby, Susan <hr/> 6 Contributor address; City; State; Zip Code Wimberley, TX 78676-3356	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Suzanne <hr/> Contributor address; City; State; Zip Code Austin, TX 78737-4638	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Marc A. <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2132	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rundell, Judy <hr/> Contributor address; City; State; Zip Code Austin, TX 78729-1900	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rural Friends of Electric Cooperatives <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2100	Amount of Contribution (\$) \$1,000.00
Principal occupation / 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: 34/44 Rpt: 38/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rydman, John <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77007-7006	7 Amount of Contribution (\$) \$3,000.00
8 Principal occupation / Job title (See Instructions) investor		9 Employer (See Instructions) self
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALAS-PORRAS, ANA LUISA <hr/> Contributor address; City; State; Zip Code Austin, TX 78756-2912	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sager, Marilyn D. <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155-4015	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeder, William <hr/> Contributor address; City; State; Zip Code Austin, TX 78759-8632	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seligman, Charles <hr/> Contributor address; City; State; Zip Code Austin, TX 78737-9048	Amount of Contribution (\$) \$25.00
Principal occupation / 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: 35/44 Rpt: 39/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SerVaas, Curtis 6 Contributor address; City; State; Zip Code Austin, TX 78757-1181	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Terry Contributor address; City; State; Zip Code Austin, TX 78737-9067	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Terry J Contributor address; City; State; Zip Code Austin, TX 78737-9067	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Terry J Contributor address; City; State; Zip Code Austin, TX 78737-9067	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sledge Law Group PLLC Contributor address; City; State; Zip Code Austin, TX 78701-2153	Amount of Contribution (\$) \$1,000.00
Principal occupation / 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: 36/44 Rpt: 40/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 10/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Standefor, Joy <hr/> 6 Contributor address; City; State; Zip Code Dripping Springs, TX 78620-2115	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanford, Patricia <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-3118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Briana <hr/> Contributor address; City; State; Zip Code Buda, TX 78610-5123	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Story, Barbara <hr/> Contributor address; City; State; Zip Code Austin, TX 78737-4643	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Story, Barbara <hr/> Contributor address; City; State; Zip Code Austin, TX 78737-4643	Amount of Contribution (\$) \$25.00
Principal occupation / 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: 37/44 Rpt: 41/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Story, Barbara 6 Contributor address; City; State; Zip Code Austin, TX 78737-4643	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strand, Elizabeth Contributor address; City; State; Zip Code Buda, TX 78610-2914	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strand, Liz Contributor address; City; State; Zip Code Buda, TX 78610-2914	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strand, Liz Contributor address; City; State; Zip Code Buda, TX 78610-2914	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strand, Liz Contributor address; City; State; Zip Code Buda, TX 78610-2914	Amount of Contribution (\$) \$10.00
Principal occupation / 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: 38/44 Rpt: 42/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sudela, Eileen <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78666-6070	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sudela, Robert <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-6070	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TBA Bank PAC- STATE <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2321	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOWAPAC <hr/> Contributor address; City; State; Zip Code Bridge City, TX 77611-4512	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREADPAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78737-2858	Amount of Contribution (\$) \$500.00
Principal occupation / 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: 39/44 Rpt: 43/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Reasonable Solutions PAC 6 Contributor address; City; State; Zip Code Austin, TX 78741-6931	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Aggregates & Concrete Association PAC Contributor address; City; State; Zip Code Round Rock, TX 78680-0459	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Alliance For Conservation PAC Contributor address; City; State; Zip Code Austin, TX 78703-0016	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas College of Emergency Physicians PAC Contributor address; City; State; Zip Code Austin, TX 78701-1665	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Farm Bureau AGFUND Contributor address; City; State; Zip Code Waco, TX 76702-2689	Amount of Contribution (\$) \$500.00
Principal occupation / 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: 40/44 Rpt: 44/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Impacta CRH PAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78726-4061	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Medical Association PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-1624	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Nurse Practitioners PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78735-6701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Sands PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-4093	Amount of Contribution (\$) \$4,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas State University System PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2434	Amount of Contribution (\$) \$1,000.00
Principal occupation / 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: 41/44 Rpt: 45/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Towing & Storage Association PAC <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77386-1024	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Trial Lawyers Association PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-1828	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Kathi <hr/> Contributor address; City; State; Zip Code Austin, TX 78737-9119	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Jeff <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-6466	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thrash, Karen <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-5486	Amount of Contribution (\$) \$25.00
Principal occupation / 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: 42/44 Rpt: 46/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vavro, Rick <hr/> 6 Contributor address; City; State; Zip Code Jonestown, TX 78645-2910	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00160770) Walgreen CO PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20005-4764	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waller, Lacy <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-9724	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallis, Robert <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666-1018	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh, Michael <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-2120	Amount of Contribution (\$) \$10.00
Principal occupation / 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: 43/44 Rpt: 47/62
2 FILER NAME Zwiener, Erin A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walther, Sharon 6 Contributor address; City; State; Zip Code Austin, TX 78758-4573	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warder, Melissa Contributor address; City; State; Zip Code Austin, TX 78737-4516	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Janna Contributor address; City; State; Zip Code Austin, TX 78737-8528	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Janna Contributor address; City; State; Zip Code Austin, TX 78737-8528	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wernecke, Ellen Contributor address; City; State; Zip Code Chicago, IL 60657-5200	Amount of Contribution (\$) \$5.00
Principal occupation / 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: 44/44 Rpt: 48/62

2 FILER NAME

Zwiener, Erin A. (The Honorable)

3 Filer ID (Ethics Commission Filers)
00081543

4 Date
10/30/2024

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Winkelman, Marc T

6 Contributor address; City; State; Zip Code

Austin, TX 78744-1414

7 Amount of Contribution (\$)
\$25.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
10/30/2024

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Winkelman, Marc T

Contributor address; City; State; Zip Code

Austin, TX 78744-1414

Amount of Contribution (\$)
\$25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
12/10/2024

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Yarnell Jr., William

Contributor address; City; State; Zip Code

Austin, TX 78709-1146

Amount of Contribution (\$)
\$1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
11/21/2024

Full name of contributor ☐ out-of-state PAC (ID#: _____)
deGraffenried, Les

Contributor address; City; State; Zip Code

Alpine, TX 79830-5020

Amount of Contribution (\$)
\$25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/14 Rpt: 49/62	2 FILER NAME Zwiener, Erin A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/20/2024	5 Payee name AT&T	
6 Amount (\$) \$189.54	7 Payee address; City; State; Zip Code 208 S Akard St Dallas, TX 75202-4206	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense telephone service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/20/2024	Payee name AT&T	
Amount (\$) \$189.54	Payee address; City; State; Zip Code 208 S Akard St Dallas, TX 75202-4206	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense telephone service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name ActBlue	
Amount (\$) \$55.33	Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/14 Rpt: 50/62	2 FILER NAME Zwiener, Erin A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/03/2024	5 Payee name ActBlue	
6 Amount (\$) \$37.30	7 Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2024	Payee name ActBlue	
Amount (\$) \$1.79	Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2024	Payee name ActBlue	
Amount (\$) \$9.15	Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/14 Rpt: 51/62	2 FILER NAME Zwiener, Erin A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/17/2024	5 Payee name ActBlue	
6 Amount (\$) \$11.31	7 Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/24/2024	Payee name ActBlue	
Amount (\$) \$45.32	Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name ActBlue	
Amount (\$) \$13.68	Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/14 Rpt: 52/62	2 FILER NAME Zwiener, Erin A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/08/2024	5 Payee name ActBlue	
6 Amount (\$) \$7.93	7 Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2024	Payee name ActBlue	
Amount (\$) \$495.54	Payee address; City; State; Zip Code PO Box 441146 West Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online contribution processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2024	Payee name Blue Scout Digital	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 2505 Royal Birkdale Dr Plano, TX 75025-5067	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/14 Rpt: 53/62	2 FILER NAME Zwiener, Erin A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/19/2024	5 Payee name Blue Scout Digital	
6 Amount (\$) \$1,250.00	7 Payee address; City; State; Zip Code 2505 Royal Birkdale Dr Plano, TX 75025-5067	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/13/2024	Payee name CFC Consulting LLC	
Amount (\$) \$350.00	Payee address; City; State; Zip Code PO Box 301074 Austin, TX 78703-0018	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense compliance consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2024	Payee name Hays County Democratic Party	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 215 W San Antonio St San Marcos, TX 78666-5549	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/14 Rpt: 54/62	2 FILER NAME Zwiener, Erin A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081543
4 Date 10/31/2024	5 Payee name Hinojosa, Cynthia Marie	
6 Amount (\$) \$1,523.37	7 Payee address; City; State; Zip Code 2209 E 19th St Mission, TX 78572-3248	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/29/2024	Payee name Hinojosa, Cynthia Marie	
Amount (\$) \$1,523.37	Payee address; City; State; Zip Code 2209 E 19th St Mission, TX 78572-3248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2024	Payee name Hinojosa, Cynthia Marie	
Amount (\$) \$1,523.37	Payee address; City; State; Zip Code 2209 E 19th St Mission, TX 78572-3248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/14 Rpt: 55/62	2 FILER NAME Zwiener, Erin A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/13/2024	5 Payee name Hinojosa, Cynthia Marie	
6 Amount (\$) \$1,523.37	7 Payee address; City; State; Zip Code 2209 E 19th St Mission, TX 78572-3248	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/31/2024	Candidate/Officeholder name Office sought Office held	
Payee name Hinojosa, Cynthia Marie		
Amount (\$) \$1,523.37	Payee address; City; State; Zip Code 2209 E 19th St Mission, TX 78572-3248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign salary
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/31/2024	Candidate/Officeholder name Office sought Office held	
Payee name Hinojosa, Cynthia Marie		
Amount (\$) \$507.78	Payee address; City; State; Zip Code 2209 E 19th St Mission, TX 78572-3248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense In-kind salary to Boots on the Ground PAC
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/14 Rpt: 56/62	2 FILER NAME Zwiener, Erin A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/29/2024	5 Payee name Hinojosa, Cynthia Marie	
6 Amount (\$) \$507.79	7 Payee address; City; State; Zip Code 2209 E 19th St Mission, TX 78572-3248	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense In-kind salary to Boots on the Ground PAC
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2024	Payee name Hinojosa, Cynthia Marie	
Amount (\$) \$507.79	Payee address; City; State; Zip Code 2209 E 19th St Mission, TX 78572-3248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense In-kind salary to Boots on the Ground PAC
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/13/2024	Payee name Hinojosa, Cynthia Marie	
Amount (\$) \$507.79	Payee address; City; State; Zip Code 2209 E 19th St Mission, TX 78572-3248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense In-kind salary to Boots on the Ground PAC
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/14 Rpt: 57/62	2 FILER NAME Zwiener, Erin A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/31/2024	5 Payee name Hinojosa, Cynthia Marie	
6 Amount (\$) \$507.78	7 Payee address; City; State; Zip Code 2209 E 19th St Mission, TX 78572-3248	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense In-kind salary to Boots on the Ground PAC
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2024	Payee name IRS	
Amount (\$) \$582.65	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tax Payment
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2024	Payee name IRS	
Amount (\$) \$579.35	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tax Payment
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/14 Rpt: 58/62	2 FILER NAME Zwiener, Erin A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/29/2024	5 Payee name IRS	
6 Amount (\$) \$579.35	7 Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tax Payment
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/13/2024	Candidate/Officeholder name Office sought Office held	
Payee name IRS		
Amount (\$) \$579.35	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tax Payment
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/31/2024	Candidate/Officeholder name Office sought Office held	
Payee name IRS		
Amount (\$) \$579.37	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043-1126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tax Payment
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/14 Rpt: 59/62	2 FILER NAME Zwiener, Erin A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081543
4 Date 11/04/2024	5 Payee name NGP Van Inc.	
6 Amount (\$) \$106.60	7 Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense database software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2024	Payee name NGP Van Inc.	
Amount (\$) \$341.12	Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense database software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name NGP Van Inc.	
Amount (\$) \$341.12	Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense database software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/14 Rpt: 60/62	2 FILER NAME Zwiener, Erin A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/04/2024	5 Payee name NGP Van Inc.	
6 Amount (\$) \$106.60	7 Payee address; City; State; Zip Code 1445 New York Ave NW Ste 200 Washington, DC 20005-2158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense database software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/29/2024	Payee name Phoneburner	
Amount (\$) \$158.83	Payee address; City; State; Zip Code 1968 S Coast Highway Laguna Bch Laguna Beach, CA 92651	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/29/2024	Payee name Phoneburner	
Amount (\$) \$175.89	Payee address; City; State; Zip Code 1968 S Coast Highway Laguna Bch Laguna Beach, CA 92651	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/14 Rpt: 61/62	2 FILER NAME Zwiener, Erin A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081543
4 Date 10/30/2024	5 Payee name Scale to Win	
6 Amount (\$) \$585.50	7 Payee address; City; State; Zip Code 13742 Harper St Santa Ana, CA 92703-1419	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense text messages
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/30/2024	Payee name Superior Blue Strategies Inc.	
Amount (\$) \$9,840.00	Payee address; City; State; Zip Code 4209 Dandridge Ter Alexandria, VA 22309-2806	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct mail
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2024	Payee name Texas House Democratic Caucus	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code PO Box 12453 Austin, TX 78711-2453	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/14 Rpt: 62/62	2 FILER NAME Zwiener, Erin A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081543
4 Date 12/13/2024	5 Payee name The Austin Club	
6 Amount (\$) \$410.20	7 Payee address; City; State; Zip Code 110 E 9th St Austin, TX 78701-2426	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event expenses
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held