MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

The MPAC Instruction	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00024940		2 Total pages filed: 98
3 COMMITTEE NAME				OFFICE USE ONLY
Texas Society Of	Anesthesiologists Political Action Committe	ee	ŀ	Date Received
				ELECTRONICALLY FILED
				10/02/2025
4 COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP		
ADDRESS	401 W. 15th St. #990	·		
	Austin, TX 78701			Date Hand-delivered or Date Postmarked
5 CAMPAIGN	MS / MRS / MR FIRST		MI	
TREASURER NAME	Paden			Receipt # Amount
	LACT			Date Processed
	NICKNAME LAST		SUFFIX	
	Karnes		M.D.	Date Imaged
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY;	STA	TE: ZIP CODE
TREASURER	401 W. 15th St. #990	711 7 00112,,	01	11., 211 0002
STREET ADDRESS	102 111 22 11 12 1			
(Residence or Business)	Austin, TX 78701			
7 CAMPAIGN TREASURER	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY;	; STA	ATE; ZIP CODE
MAILING	401 W. 15th St. #990			
ADDRESS				
	Austin, TX 78701			
8 CAMPAIGN TREASURER	AREA CODE PHONE NUMBER	EXTENSION		
PHONE	(512) 370-1659			
A DEPONT TYPE	 			
9 REPORT TYPE	X Monthly	10th day after campaign treasurer termination		Dissolution (Attach PAC-DR)
10 MONTHLY	 	— treasurer termination		<u>-</u>
REPORT FILING	January 5 April	5 July 5		X October 5
DEADLINE	February 5 May	5 August 5	5	November 5
		<u>—</u>		
	March 5 June			December 5
11 PERIOD COVERED	Month Day Year	THROUGH	Month	Day Year
OOVERLED	08/26/2025		09/25/20	025
	GO T	TO PAGE 2		
4				

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

L2 COMMITTEE NAME	and anistanista Delitical A	ation Committee	13 Filer ID	(Ethics Commission Filers)
Texas Society Of Ar	nesthesiologists Political A	ction Committee	0002494	0
4 COMMITTEE ACTIVITY	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2 Mossuros	A. Supported		
	2. Measures (Describe by date and location	A. Supported		
	of election and nature of issue.)			
		B. Opposed		
	3. Officeholders			
	Assisted (Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION	1. TOTAL UNITEMIZE	D POLITICAL CONTRIBUTIONS (OTHER THAN		
TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	OR GUARANTEES OF LOANS, OR 1ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA			
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)	 \$	75,685.19
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	68,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	274,372.17
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
.6 AFFIDAVIT	<u> </u>			
		I swear, or affirm, under penalty of po true and correct and includes all info under Title 15, Election Code.	erjury, that the rmation require	e accompanying report is ed to be reported by me
		Padan K	(arnes M.D.	
		Signature of Ca		nurer
		Signature of Ca	ampaign meas	oui Ci
AFFIX NOTA	ARY STAMP / SEAL ABOVE			
Sworn to and subscri	bed before me, by the said _		this the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of office	r administering oath	Printed name of officer administering oath	Title of of	ficer administering oath
S.g	and the second second	The state of the s		sammetering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				3 of 98
17 COMMITT	EE NAME	18 Filer ID	(Ethics Co	ommission Filers)
Texas So	ciety Of Anesthesiologists Political Action Committee	00024940		<u>,</u>
	E SUBTOTALS SCHEDULE		SUB	TOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	75,685.19
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		\$		
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	!	\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.	SCHEDULE E: LOANS		\$	
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	68,000.00
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONEI	ARY POLITICAL CON	ITRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to c	omplete this fo	orm.	1	Total pages Schedule A1: Sch: 1/90 Rpt: 4/98	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Texas Socie	y Of Anesthesiologists Political Act	ion Committee			00024940	
4	Date 08/29/2025	 Full name of contributor ou ou Abdalla, Mohamad Contributor address; City; State; Zi 	n Code		7	Amount of Contribution (\$)	\$150.00
		Houston, TX 77042	p couc				
8	Principal occu Physician	oation / Job title (See Instructions)		9 Employer (See Instructions)		
	Date	Full name of contributor	it-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/12/2025	Abouleish, Amr	` _	,		· ,	\$85.00
		Contributor address; City; State; Zi	p Code				
		Houston, TX 77059					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Physician						
	Date	Full name of contributor ou	it-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Abraham, Binu					\$150.00
		Contributor address; City; State; Zi	p Code				
		Houston, TX 77042					
	Principal occu Physician	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor ou	it-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Abramson, Steven		,		(,,	\$150.00
		Contributor address; City; State; Zi	p Code				
		Houston, TX 77024					
	Principal occu Physician	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor ou	it-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Agbetoba, Airat					\$150.00
		Contributor address; City; State; Zi	p Code				
		Houston, TX 77007					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/90 Rpt: 5/98	
2	FILER NAME	Of A coult of the fact Bullion	I A di con Constituto		3	Filer ID (Ethics Commission	n Filers)
_		y Of Anesthesiologists Politica			L	00024940	
4	Date 09/09/2025	5 Full name of contributor [Aggarwal, Amit6 Contributor address; City; Sta	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$100.00
		Bellaire, TX 77401	, <u>-</u>				
8	Principal occu Physician	pation / Job title (See Instructions)		9 Employer (See Instructions	s)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/29/2025	Aijaz, Tabish	_				\$150.00
		Contributor address; City; Sta	te; Zip Code				
		Houston, TX 77042					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Г	Amount of Contribution (\$)	
	08/29/2025	Aiyer, Viswanathan	out of state 1 AC (ID#)		Tunidan of Contabation (4)	\$150.00
		Contributor address; City; Sta	te; Zip Code				
		Houston, TX 77042					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/29/2025	Alaniz, Pedro Contributor address; City; Sta	te; Zip Code				\$150.00
		Sugar Land, TX 77479					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/29/2025	Alexander, Sandra					\$150.00
		Contributor address; City; Sta	te; Zip Code				
		Houston, TX 77004					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 3/90 Rpt: 6/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor out-of-state PAC (ID#: Ali, Mohamed Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$150.00
_		Houston, TX 77007	1			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	s) 		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Ali, Mohammad Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
	Principal occu	Houston, TX 77089 pation / Job title (See Instructions)	Employer (See Instructions	 - s)		
	Physician					
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID#: Allen, Stacey Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$84.00
		San Antonio, TX 78230				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/08/2025	Full name of contributor out-of-state PAC (ID#: Allred, Anna Contributor address; City; State; Zip Code Richmond, TX 77469		•	Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#: Alquicira-Macedo, Fernando Contributor address; City; State; Zip Code Houston, TX 77085			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			1			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/90 Rpt: 7/98	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$150.00
•	Dringing age	Houston, TX 77042	Employer (See Instructions	_		
8	Physician Physician	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_An, Daniel Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$84.00
		Fulshear, TX 77441				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/12/2025	Full name of contributor out-of-state PAC (ID#:_Anton, James Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$84.00
		Houston, TX 77009				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Arif, Abdus Contributor address; City; State; Zip Code Kingwood, TX 77346)		Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_Arunkumar, Radha Contributor address; City; State; Zip Code Houston, TX 77030			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 5/90 Rpt: 8/98	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$150.00
8	Principal occu	Bellaire, TX 77401 pation / Job title (See Instructions)	9 Employer (See Instructions	<u>''</u>		
0	Physician Physician	oalion7 Job title (See Instructions)	employer (See Instructions	·)		
	Date 08/29/2025	Full name of contributor ut-of-state PAC (ID# Ashary, Nishan Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$150.00
	Dringinal acqu	Sugar Land, TX 77479 pation / Job title (See Instructions)	Employer (See Instructions	·/-		
	Physician Physician	oalion 7 300 title (See instructions)	Employer (See Instructions	·)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID# Ata, Monica Contributor address; City; State; Zip Code	:)	•	Amount of Contribution (\$)	\$84.00
		Allen, TX 75013				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#Baerenstecher, John Contributor address; City; State; Zip Code Houston, TX 77007	÷)	•	Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/12/2025	Full name of contributor out-of-state PAC (ID#Ball, Timothy Contributor address; City; State; Zip Code College Station, TX 77845	:	•	Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/90 Rpt: 9/98	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Texas Socie	y Of Anesthesiologists Politica	I Action Committee			00024940	
4	Date 08/29/2025	5 Full name of contributor Banks, Brenda	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$150.00
		6 Contributor address; City; StaHouston, TX 77005	te; Zip Code				
8	Princinal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	.) 		
	Physician			Employer (See mediations	,		
	Date	Full name of contributor	aut of state DAC (ID#)	\		Amount of Contribution (\$)	
	08/29/2025	Bannis, Rohan	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$150.00
	00/29/2023		to. Zin Codo				Ψ130.00
		Contributor address; City; Sta	te; Zip Code				
		Houston, TX 77042					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>.</u>		
	Physician				,		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/17/2025	Barboza, Andrew					\$20.00
		Contributor address; City; Sta	te; Zip Code				
		El: 1 TV 75700					
	D: : 1	Flint, TX 75762			Ĺ		
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Physician						
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/29/2025	Barroso, Stephen					\$150.00
		Contributor address; City; Sta	te; Zip Code				
		Houston, TX 77057					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>. </u>		
	Physician						
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/29/2025	Bawany, Fauzia					\$150.00
		Contributor address; City; Sta	te; Zip Code				
		Houston, TX 77042					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Physician	(222.000)		, , , , , , , , , , , , , , , , , , , ,	,		
_	-						

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 7/90 Rpt: 10/98	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		y Of Anesthesiologists Political Action Committee			00024940	
4	Date 08/29/2025				Amount of Contribution (\$)	\$150.00
	00/29/2023	6 Contributor address; City; State; Zip Code		ł		Φ130.00
Q	Dringinal occu	Houston, TX 77042 pation / Job title (See Instructions)	9 Employer (See Instructions	-, 		
0	Physician Physician	Janon / Job tine (See Instructions)	employer (See instructions	>)		
	Date	Full name of contributor		Т	Amount of Contribution (\$)	
	08/29/2025	Beckman, Stacie			()	\$150.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77042				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Physician	,	, ,,, (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,		
	Date	Full name of contributor ut-of-state PAC (IE	D#:)	Π	Amount of Contribution (\$)	
	09/10/2025	Beitzel, Michael				\$84.00
		Contributor address; City; State; Zip Code		1		
		Abilene, TX 79602				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>L</u> S)		
	Physician					
	Date	Full name of contributor uut-of-state PAC (IE	D#:)		Amount of Contribution (\$)	
	09/08/2025	Beitzel, Michael				\$84.00
		Contributor address; City; State; Zip Code		1		
		Abilene, TX 79602				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>L</u> S)		
	Physician					
	Date	Full name of contributor ut-of-state PAC (IE	D#:)		Amount of Contribution (\$)	
	08/29/2025	Bergson, Milton]		\$150.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Physician					
			•			

	MONEI	ARY POLITICAL CONTR	(IBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to comp	lete this fo	rm.	1	Total pages Schedule A1: Sch: 8/90 Rpt: 11/98	
2	FILER NAME	of Arresthesis Issued Balitical Astion O			3	Filer ID (Ethics Commission	n Filers)
_		y Of Anesthesiologists Political Action C			_	00024940	
4	Date 08/29/2025	 Full name of contributor out-of-star out-o	ate PAC (ID#:)	7	Amount of Contribution (\$)	\$150.00
		Houston, TX 77057					
8	Principal occu Physician	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date	Full name of contributor out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	09/09/2025	Berndt, R. Barry		_			\$84.00
		Contributor address; City; State; Zip Cod	le				
		Beaumont, TX 77702					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor	ate PAC (ID#:)		Amount of Contribution (\$)	
	09/08/2025	Berndt, R. Barry		,		()	\$62.50
		Contributor address; City; State; Zip Cod	le				
		Beaumont, TX 77702					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Physician						
	Date	Full name of contributor out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Bernell, Michael Contributor address; City; State; Zip Cod	le				\$150.00
		Houston, TX 77024					
	Principal occu Physician	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Bhamidipati, Sujatha					\$150.00
		Contributor address; City; State; Zip Cod	le				
		Sugar Land, TX 77082					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIB	BUTIONS		SCHEDUL	E A1
	The Instruc	etion Guide explains how to complete	e this form.	1	Total pages Schedule A1: Sch: 9/90 Rpt: 12/98	
2	FILER NAME			3	Filer ID (Ethics Commissio	n Filers)
	Texas Socie	y Of Anesthesiologists Political Action Com	mittee		00024940	
4	Date 09/09/2025	5 Full name of contributor			Amount of Contribution (\$)	\$25.00
	03/03/2023	6 Contributor address; City; State; Zip Code				Ψ23.00
		Tyler, TX 75703				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)		
	Physician					
	Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)	
	08/29/2025	Boozalis, Steve				\$150.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)		
	Physician					
	Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)	
	09/10/2025	Bracken, Christopher				\$84.00
		Contributor address; City; State; Zip Code				
		San Antonio, TX 78240				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)		
	Physician					
	Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)	
	09/08/2025	Bradley, Stephanie				\$84.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)		
	Physician					
	Date	Full name of contributor ut-of-state F	PAC (ID#:)	Amount of Contribution (\$)	
	08/29/2025	Brann, James				\$150.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77025				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)		
	Physician					
_			•			

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 10/90 Rpt: 13/98	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$150.00
8	Principal occu	Houston, TX 77042 pation / Job title (See Instructions)	Employer (See Instructions)		
	Physician	sation 7 300 title (See instructions)	Employer (See manuchons	,		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Brown, Christopher Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
	Dringing! goog	Lubbock, TX 79410	Employer (See Instructions			
	Physician Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#: Brown, Zoe Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$8.33
		Houston, TX 77025				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/08/2025	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 11/90 Rpt: 14/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee	3	Filer ID (Ethics Commission 00024940	on Filers)
4	Date 09/10/2025	 Full name of contributor	7	Amount of Contribution (\$)	\$84.00
_		Abilene, TX 79602			
8	Principal occu Physician	pation / Job title (See Instructions) 9 Employ	yer (See Instructions)		
	Date 09/08/2025	Full name of contributor out-of-state PAC (ID#: Callas, G. Ray Contributor address; City; State; Zip Code)	Amount of Contribution (\$)	\$1,000.00
	Dringinal occu	Beaumont, TX 77726 pation / Job title (See Instructions) Employ	yer (See Instructions)		
	Physician Physician	Dation 7 300 title (See Instructions)	yei (See iiisii uciioiis)		
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID#: Caplan, Lisa Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$500.00
		Bellaire, TX 77401			
	Principal occu Physician	pation / Job title (See Instructions) Employ	yer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Carrion-Zamora, Victor Contributor address; City; State; Zip Code Houston, TX 77081		Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions) Employ	yer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Carroll, Luke Contributor address; City; State; Zip Code Houston, TX 77042		Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions) Employ	yer (See Instructions)		
		,			

	MONEI	ARY POLITICAL CONTRIB	UTIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complet	e this form.	1	Total pages Schedule A1: Sch: 12/90 Rpt: 15/98	
2	FILER NAME			3	Filer ID (Ethics Commissio	n Filers)
	Texas Socie	y Of Anesthesiologists Political Action Com	mittee		00024940	
4	Date 08/29/2025	5 Full name of contributor out-of-state F Carvajal, Tomas	PAC (ID#:	7	Amount of Contribution (\$)	\$150.00
		6 Contributor address; City; State; Zip Code				
_		Houston, TX 77042	1			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer	(See Instructions)		
	Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)	
	08/29/2025	Cattano, Davide				\$84.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77030				
	Principal occu	pation / Job title (See Instructions)	Employer	(See Instructions)		
	Physician					
	Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)	
	09/10/2025	Catton, Evan				\$25.00
		Contributor address; City; State; Zip Code				
		Tyler, TX 75709				
		pation / Job title (See Instructions)	Employer	(See Instructions)		
	Physician					
	Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)	
	09/10/2025	Causey, Sommer				\$84.00
		Contributor address; City; State; Zip Code				
		Galveston, TX 77554				
	•	pation / Job title (See Instructions)	Employer	(See Instructions)		
	Physician					
	Date	Full name of contributor ut-of-state F	PAC (ID#:)	Amount of Contribution (\$)	
	08/29/2025	Cavanaugh, Mark				\$150.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77042				
		pation / Job title (See Instructions)	Employer	(See Instructions)		
	Physician					
	<u> </u>					

	MONEI	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 13/90 Rpt: 16/98	
2	FILER NAME	of Arradhanial side Palitical Astica Constitution		3	Filer ID (Ethics Commission	n Filers)
_		ry Of Anesthesiologists Political Action Committee			00024940	
4	Date 08/29/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$150.00
8	Principal occu	Houston, TX 77042 pation / Job title (See Instructions)	Employer (See Instructions))		
	Physician	·				
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID#:_ Chan, Calvin Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00
		Dallas, TX 75219				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Chan, Tiffany Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
		Galveston, TX 77555				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Chang, Alex Contributor address; City; State; Zip Code Houston, TX 77057			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 09/12/2025	Full name of contributor out-of-state PAC (ID#:_ Chao-Knize, Yuan-Jiun Nicole Contributor address; City; State; Zip Code Austin, TX 78759			Amount of Contribution (\$)	\$250.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions))		

	MONEI	ARY POLITICAL CO	NTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 14/90 Rpt: 17/98	
2	FILER NAME		.: 0 :::		3	Filer ID (Ethics Commission	n Filers)
		y Of Anesthesiologists Political A				00024940	
4	Date 09/08/2025	5 Full name of contributor Chen, Joy6 Contributor address; City; State;	out-of-state PAC (ID#: Zip Code)	7	Amount of Contribution (\$)	\$250.00
		Plano, TX 75093					
8	Principal occu Physician	pation / Job title (See Instructions)		9 Employer (See Instructions	i)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Cheng, Nancy					\$150.00
		Contributor address; City; State;	Zip Code				
		Houston, TX 77042					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Physician						
	Date	—	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Chin, Lilibeth					\$150.00
		Contributor address; City; State;	Zip Code				
		Pearland, TX 77584					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Physician						
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Chirala, Karthik					\$150.00
		Contributor address; City; State;	Zip Code				
		Houston, TX 77042					
	Principal occu Physician	oation / Job title (See Instructions)		Employer (See Instructions	·)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/24/2025	Choi, Christopher					\$42.00
		Contributor address; City; State;	Zip Code				
		Dallas, TX 75204					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/90 Rpt: 18/98	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$150.00
8	Principal occu	Houston, TX 77040 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Physician Physician	pation / Job title (See Instructions)	employer (See Instructions	')		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Chuan, Joseph Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
	Principal occu	Houston, TX 77004 pation / Job title (See Instructions)	Employer (See Instructions	<u>) </u>		
	Physician			,		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Clanton, David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00
		San Antonio, TX 78256				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Cline, Donald Contributor address; City; State; Zip Code League City, TX 77573			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Collins, James Contributor address; City; State; Zip Code Conroe, TX 77384			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 16/90 Rpt: 19/98	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$150.00
0	Dringing con	Katy, TX 77494	0 Employer (See Instructions			
8	Physician	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#: Cook, Christopher Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3,860.00
		Garland, TX 75043				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Cooper, Lane Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
		Houston, TX 77079				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_Craft, Hadyn Contributor address; City; State; Zip Code Houston, TX 77008			Amount of Contribution (\$)	\$25.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_ Culbertson, Timothy Contributor address; City; State; Zip Code Temple, TX 76502			Amount of Contribution (\$)	\$8.33
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
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	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 17/90 Rpt: 20/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee	e	3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$150.00
_	Daine in all a con-	Houston, TX 77055	Section (Contraction			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/09/2025	Full name of contributor out-of-state PAC (IED ang, Anh Contributor address; City; State; Zip Code) #:)		Amount of Contribution (\$)	\$500.00
	Dringing! goog	Houston, TX 77025	Employer (See Instruction	<u></u>		
	Physician Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/04/2025	Full name of contributor))	•	Amount of Contribution (\$)	\$84.00
		Fort Worth, TX 76109				
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (IED aumerie, Geraldine Contributor address; City; State; Zip Code Houston, TX 77042)		Amount of Contribution (\$)	\$150.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (IEDave, Siddharth Contributor address; City; State; Zip Code Lucas, TX 75002	D#:)	•	Amount of Contribution (\$)	\$84.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	5)		
			•			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 18/90 Rpt: 21/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/04/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$21.00
_	Deireirel	Houston, TX 77057	O Frankrije (Contrakting			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Davila-Perez, Ruben Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
	Principal occu	Houston, TX 77057 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	Physician			,		
	Date 08/29/2025	Full name of contributor)		Amount of Contribution (\$)	\$150.00
		Houston, TX 77055				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/08/2025	Full name of contributor out-of-state PAC (ID#:_ DeSocio, Peter Contributor address; City; State; Zip Code San Antonio, TX 78229			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID#:_ Dewan, Brian Contributor address; City; State; Zip Code Austin, TX 78731)		Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
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	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 19/90 Rpt: 22/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$150.00
8	Principal occu	Houston, TX 77057 pation / Job title (See Instructions)	Employer (See Instructions	()		
_	Physician		Campioyor (God moradoro)	,		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Dizon, John Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
	Principal occu	Katy, TX 77494 pation / Job title (See Instructions)	Employer (See Instructions			
	Physician	sation, con the (occ mandations)	Employer (See manacions	')		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Dogan, Oya Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
		Pearland, TX 77584				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Donnell, Malcolm Contributor address; City; State; Zip Code Houston, TX 77027			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/04/2025	Full name of contributor out-of-state PAC (ID#:_ Drees, Jeffrey Contributor address; City; State; Zip Code Corsicana, TX 75110			Amount of Contribution (\$)	\$85.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	5)		
		·				

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 20/90 Rpt: 23/98	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/09/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$750.00
8	Principal occu	Dallas, TX 75230 pation / Job title (See Instructions)	9 Employer (See Instructions	.,		
0	Physician Physician	oauon7 Job title (See instructions)	e Employer (See instructions	')		
	Date 09/12/2025	Full name of contributor out-of-state PAC (ID#:_ Dupont, Cedric Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Rollingwood, TX 78746 pation / Job title (See Instructions)	Employer (See Instructions) 		
	Physician Physician	odion 7 oob title (See mandenons)	Employer (See Instructions	')		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_ Dupont, Cedric Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$84.00
		Rollingwood, TX 78746				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Eagleton, Mark Contributor address; City; State; Zip Code Houston, TX 77042			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/08/2025	Full name of contributor out-of-state PAC (ID#:_Eddings, Joseph Contributor address; City; State; Zip Code Austin, TX 78759			Amount of Contribution (\$)	\$85.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONEI	ARY POLITICAL CO	NIRIBUTIO	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 21/90 Rpt: 24/98	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Texas Socie	y Of Anesthesiologists Political	Action Committee			00024940	
4	Date 08/29/2025	5 Full name of contributor Ellison, William6 Contributor address; City; State	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$150.00
		Houston, TX 77006	, _,				
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Physician						
_	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/09/2025	Emelife, Patrick					\$84.00
		Contributor address; City; State	; Zip Code				
		Grand Prairie, TX 75054					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> :)		
	Physician	,		, , ,	,		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/29/2025	Emmanuel, Michelle					\$150.00
		Contributor address; City; State	; Zip Code				
		Houston, TX 77019					
	Principal occu	pation / Job title (See Instructions)	1	Employer (See Instructions	.) [
	Physician				,		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/15/2025	Erian, Ralph	` _	,		()	\$84.00
		Contributor address; City; State	; Zip Code				
		C At TV 70040					
	Principal occu	San Antonio, TX 78212 pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	·/		
	Physician	oation / Job title (See matractions)		Employer (See manuchons	')		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/08/2025	Erickson, Joseph		,		(,,	\$84.00
		Contributor address; City; State	; Zip Code				
	Delinair - L	Abilene, TX 79601		Empleyer (Cook to the control	<u></u>		
	Principal occu Physician	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	i ilysiciali						

	MONEI	ARY POLITICAL CON	IRIBUTIONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to co	mplete this form.	1	Total pages Schedule A1: Sch: 22/90 Rpt: 25/98	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Texas Socie	y Of Anesthesiologists Political Action	on Committee		00024940	
4	Date	—	of-state PAC (ID#:		' Amount of Contribution (\$)	
	08/29/2025	Eype, Sheila				\$150.00
		6 Contributor address; City; State; Zip	Code			
		Houston, TX 77057				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Em	ployer (See Instructions)		
	Date	Full name of contributor ut-	of-state PAC (ID#:)	Amount of Contribution (\$)	
	08/29/2025	Fahey, Brian				\$150.00
		Contributor address; City; State; Zip	Code			
		Houston, TX 77042				
		pation / Job title (See Instructions)	Em	ployer (See Instructions)		
	Physician					
	Date	Full name of contributor uut-	of-state PAC (ID#:)	Amount of Contribution (\$)	
	08/29/2025 Farias Kovac, Mario					\$150.00
		Contributor address; City; State; Zip	Code			
		Houston, TX 77042				
		pation / Job title (See Instructions)	Em	ployer (See Instructions)		
	Physician					
	Date	Full name of contributor ut-	of-state PAC (ID#:)	Amount of Contribution (\$)	
	09/09/2025	Farmer, Lisa Contributor address; City; State; Zip	Code			\$1,000.00
		Galveston, TX 77551				
	Principal occu Physician	oation / Job title (See Instructions)	Em	ployer (See Instructions)		
	Date	Full name of contributor out-	of-state PAC (ID#:)	Amount of Contribution (\$)	
	09/10/2025	Fay, James				\$84.00
		Contributor address; City; State; Zip	Code			
		Georgetown, TX 78628				
	Principal occu Physician	pation / Job title (See Instructions)	Em	ployer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 23/90 Rpt: 26/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$150.00
8	Principal occu	Houston, TX 77042 pation / Job title (See Instructions)	Employer (See Instructions			
0	Physician Physician	oalion7 Job title (See instructions)	e Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Ferris, Marley Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
	Principal occu	Houston, TX 77098 pation / Job title (See Instructions)	Employer (See Instructions)		
	Physician	(,		
	Date 09/10/2025	Full name of contributor			Amount of Contribution (\$)	\$84.00
		Galveston, TX 77551				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Flores, Gary Contributor address; City; State; Zip Code Houston, TX 77024			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/16/2025	Full name of contributor out-of-state PAC (ID#:_Ford, Dina Contributor address; City; State; Zip Code Houston, TX 77096			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONEI	ARY POLITICAL CONTR	IBUTIC	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to comp	lete this f	orm.	1	Total pages Schedule A1: Sch: 24/90 Rpt: 27/98	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		y Of Anesthesiologists Political Action C				00024940	
4	Date 08/29/2025	Foster, Harris	ate PAC (ID#:_)	7	Amount of Contribution (\$)	\$150.00
		Houston, TX 77027					
8	Principal occu Physician	pation / Job title (See Instructions)		9 Employer (See Instructions	()		
	Date	Full name of contributor out-of-sta	ate PAC (ID#:_)		Amount of Contribution (\$)	
	09/09/2025	Fox, Kaitlin					\$84.00
		Contributor address; City; State; Zip Cod	le				
		Temple, TX 76508					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Physician						
	Date	-	ate PAC (ID#:_)		Amount of Contribution (\$)	
	08/29/2025	Fox, Lindsay					\$150.00
		Contributor address; City; State; Zip Cod	le				
		Houston, TX 77005					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Physician						
	Date	Full name of contributor ut-of-sta	ate PAC (ID#:_			Amount of Contribution (\$)	
	08/29/2025	Fritzhand, Kevin					\$150.00
		Contributor address; City; State; Zip Cod	le				
		Houston, TX 77042					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>. </u>		
	Physician						
	Date	Full name of contributor ut-of-sta	ate PAC (ID#:_)		Amount of Contribution (\$)	
	08/29/2025	Fuller, Tracy Ann					\$150.00
		Contributor address; City; State; Zip Cod	le				
		Houston, TX 77024					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Physician	•		· ·	,		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 25/90 Rpt: 28/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/18/2025	 Full name of contributor out-of-state PAC (ID# Funston, Joe Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$250.00
_		Galveston, TX 77555				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID# Gandhi, Samir Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$84.00
	Principal occu	San Antonio, TX 78229 pation / Job title (See Instructions)	Employer (See Instructions	:) 		
	Physician Physician	sation 7 300 title (See instructions)	Employer (See Instructions	•)		
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID# Garcia, Priscilla Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Bellaire, TX 77401				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID# Gardner, Kelly Contributor address; City; State; Zip Code San Antonio, TX 78257			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID# Garmon, Emily Contributor address; City; State; Zip Code Temple, TX 76502			Amount of Contribution (\$)	\$250.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 26/90 Rpt: 29/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/08/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$750.00
0	Dringing Loon	Bellaire, TX 77401	Employer (See Instructions			
8	Physician Physician	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Giam, Patrick Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
		Houston, TX 77005				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_ Gibbons, Stacey Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00
		League City, TX 77573				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Gilbert, Janet Contributor address; City; State; Zip Code Houston, TX 77057			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Glentzer, Mark Contributor address; City; State; Zip Code Houston, TX 77008			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 27/90 Rpt: 30/98	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/10/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$84.00
8	Principal occu	Houston, TX 77030	9 Employer (See Instructions			
0	Physician Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	•)		
	Date 09/08/2025	Full name of contributor out-of-state PAC (ID#:_Gloyna, David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Deire sin al access	Salado, TX 76571	Foundament (October to action of	Ĺ		
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Godwin, Kristalynne Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
		League City, TX 77573				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Goldstein, Mark Contributor address; City; State; Zip Code Houston, TX 77024			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_ Goodridge, Timothy Contributor address; City; State; Zip Code Round Rock, TX 78681			Amount of Contribution (\$)	\$250.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
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	MONEI	ARY POLITICAL CO	NIRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 28/90 Rpt: 31/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political A	Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	5 Full name of contributorGoto, Rudo6 Contributor address; City; State	out-of-state PAC (ID#: ; Zip Code		7	Amount of Contribution (\$)	\$150.00
8	Principal occu Physician	Houston, TX 77042 pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor Green, David Contributor address; City; State	out-of-state PAC (ID#:_ ; Zip Code			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	Sugar Land, TX 77479 pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor Greger, Jennifer Contributor address; City; State	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$150.00
		The Woodlands, TX 77381 pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Physician Date 08/29/2025	Full name of contributor Griggs, Felicia Contributor address; City; State Houston, TX 77042	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor Groen, Alfred Contributor address; City; State Houston, TX 77005	out-of-state PAC (ID#: ; Zip Code			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 29/90 Rpt: 32/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	on Filers)
4	Date 09/17/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$250.00
_	Duinning Langu	Waco, TX 76712	O Familiaria (Can Instructiona			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Gunn, Clint Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
	Principal occu	Houston, TX 77042 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	Physician	sation 7 oob title (See mattactions)	Employer (See Instructions	,		
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID#:_ Guo, James Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77042				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Guo, James Contributor address; City; State; Zip Code Houston, TX 77042			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_ Guragain, Richesh Contributor address; City; State; Zip Code League city, TX 77573			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 30/90 Rpt: 33/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/12/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$83.34
_		San Antonio, TX 78240				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/08/2025	Full name of contributor out-of-state PAC (ID#: Guzman-Reyes, Sara Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Deinsinal assu	Houston, TX 77030	Franklavar (Caa laatuvatiana			
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Haack, Kirsten Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
		Houston, TX 77042				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_ Hagberg, Carin Contributor address; City; State; Zip Code Houston, TX 77030			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
		,				

	MONET	ARY POLITICAL CONTRIBUT	ΓIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 31/90 Rpt: 34/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committe	ee	3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor out-of-state PAC (I Ham, Angelito Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$150.00
_	Deignaignal	Bellaire, TX 77401	Contractions			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (I Hancher, Shannon Contributor address; City; State; Zip Code	ID#:)		Amount of Contribution (\$)	\$84.00
	Deinsinal	Bellaire, TX 77401	Faralassa (Ossalastasstissa			
	Physician	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (I Hanson, George Contributor address; City; State; Zip Code	ID#:)		Amount of Contribution (\$)	\$150.00
		Houston, TX 77024				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/19/2025	Full name of contributor out-of-state PAC (I Harvey, Benjamin Contributor address; City; State; Zip Code Houston, TX 77055	ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (Industry Pack (Industry	ID#:)		Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			·			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 32/90 Rpt: 35/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/10/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$84.00
_		San Antonio, TX 78258				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/12/2025	Full name of contributor out-of-state PAC (ID#: Hayes, W. Brendan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Deinsinal assu	Fort Worth, TX 76109				
	Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID#:_ Hector, Casey Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Waco, TX 76706				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Hence, Reginald Contributor address; City; State; Zip Code Cypress, TX 77433			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Henderson, Brian Contributor address; City; State; Zip Code Conroe, TX 77304			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
		•				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 33/90 Rpt: 36/98	
2	FILER NAME Texas Socie	ty Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$150.00
_	Pointing I accord	Houston, TX 77042	O Family and (October to attraction	<u></u>		
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/04/2025	Full name of contributor out-of-state PAC (ID#:_ Hernandez, Raul Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$42.00
	Principal occu	Rio Grande City, TX 78582 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	Physician		p.oyo. (000ou uouo	,		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Herrera, Hector Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
		Houston, TX 77007				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Highfill, Erin Contributor address; City; State; Zip Code Garland, TX 75044)		Amount of Contribution (\$)	\$100.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Hiller, Kenneth Contributor address; City; State; Zip Code Houston, TX 77094			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
		<u>,</u>				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 34/90 Rpt: 37/98	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/05/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$45.00
_		Beaumont, TX 77705				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Hirsch, Douglas Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
	Dringinal accu	Houston, TX 77042 pation / Job title (See Instructions)	Employer (See Instructions	_		
	Physician Physician	pation / Job title (See instructions)	Employer (See instructions	')		
	Date 09/09/2025	Full name of contributor)		Amount of Contribution (\$)	\$84.00
		Round Rock, TX 78681				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_ Hollenshead, Andy Contributor address; City; State; Zip Code Dallas, TX 75219			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/08/2025	Full name of contributor out-of-state PAC (ID#:_ Horazeck, Christian Contributor address; City; State; Zip Code Round Rock, TX 78664			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	·)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 35/90 Rpt: 38/98	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$150.00
8	Principal occu	Houston, TX 77042 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Physician Physician	Sation 7 300 title (See Instructions)	Employer (See Instructions	')		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Houston, Christopher Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
	Principal occu	Houston, TX 77042 pation / Job title (See Instructions)	Employer (See Instructions	()		
	Physician	salion, our time (coo manacastic)	_mpleyor (eee meadeans	,		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#: Huang, Henry Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.83
		Houston, TX 77055				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Hunter, Grant Contributor address; City; State; Zip Code Houston, TX 77042			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	i)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 36/90 Rpt: 39/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/09/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$84.00
_		Beaumont, TX 77726				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#: Hutson, Larry Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
	Dringinal accu	Temple, TX 76502 pation / Job title (See Instructions)	Employer (See Instructions			
	Physician Physician	Jation / Job title (See Instructions)	Employer (See Instructions	,		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Hwang, Walt Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
		Houston, TX 77025				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:Ingle, Ashwin Contributor address; City; State; Zip Code Houston, TX 77057)		Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#: Ingram, Kristyn Contributor address; City; State; Zip Code El Paso, TX 79912)		Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONEI	ARY POLITICAL CONTRI	BUTIC)NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to comple	ete this f	orm.	1	Total pages Schedule A1: Sch: 37/90 Rpt: 40/98	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Texas Socie	y Of Anesthesiologists Political Action Co	mmittee			00024940	
4	Date	—	e PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/10/2025						\$8.33
		6 Contributor address; City; State; Zip Code					
_		Houston, TX 77098			<u></u>		
8	Principal occu Physician	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Date	Full name of contributor ut-of-state	e PAC (ID#:_)	Г	Amount of Contribution (\$)	
	08/29/2025	Jayasinghe, Chandra	` -			`,	\$150.00
		Contributor address; City; State; Zip Code	;				
		Houston, TX 77024					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Physician						
	Date	Full name of contributor out-of-state	e PAC (ID#:_)		Amount of Contribution (\$)	
	08/29/2025	Jeffcoat, Sheila					\$150.00
		Contributor address; City; State; Zip Code)				
		Houston, TX 77459					
	Drincinal occu	pation / Job title (See Instructions)		Employer (See Instructions	·, 		
	Physician Physician	oation / 300 title (See instructions)		Employer (See mstructions)		
	Date	Full name of contributor out-of-state	e PAC (ID#:_)		Amount of Contribution (\$)	
	09/08/2025	Jekot, Jeffrey					\$100.00
		Contributor address; City; State; Zip Code	;				
		Austin, TX 78746					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Physician						
	Date	Full name of contributor out-of-state	e PAC (ID#:_			Amount of Contribution (\$)	
	09/09/2025	Jenkins, Kalan					\$84.00
		Contributor address; City; State; Zip Code	:				
		Salado, TX 76571					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Physician						

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 38/90 Rpt: 41/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$150.00
•	Dringing Lagge	Houston, TX 77057	D Employer (See Instructions			
8	Physician Physician	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Johnson, Ty Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
	Dringing! aggs	Houston, TX 77019	Employer (Coo Instructions			
	Physician Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_ Jones, Chauncey Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$84.00
		Magnolia, TX 77355				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Jones, Rachel Contributor address; City; State; Zip Code Houston, TX 77057			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/12/2025	Full name of contributor out-of-state PAC (ID#:_ Jones, Zachary Contributor address; City; State; Zip Code Frisco, TX 75036			Amount of Contribution (\$)	\$100.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 39/90 Rpt: 42/98	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	on Filers)
4	Date 08/29/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$150.00
_	Duinning Langu	Houston, TX 77020	Continue (Continue tions	<u></u>		
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID) Joseph, Danny Contributor address; City; State; Zip Code	<u>*:)</u>		Amount of Contribution (\$)	\$150.00
	Drincinal occu	Sugar Land, TX 77478 pation / Job title (See Instructions)	Employer (See Instructions	-, 		
	Physician Physician	pation 7 Job title (See Instructions)	Employer (See instructions	>)		
	Date 09/08/2025	Full name of contributor out-of-state PAC (ID# Joshi, Girish Contributor address; City; State; Zip Code	<u>#:)</u>	•	Amount of Contribution (\$)	\$500.00
		Plano, TX 75024	1			
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	s) 		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID) Jue, Lenny Quan Contributor address; City; State; Zip Code Houston, TX 77042	<u>#:)</u>		Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID# Kandil, Enas Contributor address; City; State; Zip Code Irving, TX 75063	<u>*:)</u>	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			•			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 40/90 Rpt: 43/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/04/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
_	Dringing Loggy	Bellaire, TX 77401	O Employer (See Instructions			
8	Physician Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/08/2025	Full name of contributor out-of-state PAC (ID#:_ Karnes, Paden Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$84.00
		Houston, TX 77030				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_ Kenjarski, Thomas Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$84.00
		Dallas, TX 75243				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_Kercheville, Scott Contributor address; City; State; Zip Code San Antonio, TX 78215			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/08/2025	Full name of contributor out-of-state PAC (ID#:_Kercheville, Scott Contributor address; City; State; Zip Code San Antonio, TX 78215			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONEI	ARY POLITICAL CO	ONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how t	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 41/90 Rpt: 44/98	
2	FILER NAME				3	3 Filer ID (Ethics Commission Filers)	
		y Of Anesthesiologists Political	_			00024940	
4	Date 08/29/2025	5 Full name of contributor Kessinger, Thomas	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$150.00
		6 Contributor address; City; Stat	e; Zip Code				
		Houston, TX 77059					
8	Principal occu Physician	pation / Job title (See Instructions)		9 Employer (See Instructions	s)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/12/2025	Khorsand, Sarah					\$84.00
		Contributor address; City; Stat	e; Zip Code				
		Dallas, TX 75229					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Physician						
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/09/2025	Kimatian, Stephen					\$250.00
		Contributor address; City; Stat	e; Zip Code				
		Dallas, TX 75220			Ĺ		
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/09/2025	King, R. Baker Contributor address; City; Stat	e; Zip Code				\$84.00
		San Antonio, TX 78232					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/09/2025	Koehler, Michelle	_				\$84.00
		Contributor address; City; Stat	e; Zip Code				
		New Braunfels, TX 78132					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONEI	ARY POLITICAL CON	IRIBUTIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to co	mplete this form.	1	Fotal pages Schedule A1: Sch: 42/90 Rpt: 45/98	
2	FILER NAME				Filer ID (Ethics Commission	n Filers)
		y Of Anesthesiologists Political Actio			00024940	
4	Date 09/12/2025	Kolle, Bracken	of-state PAC (ID#:	7 /	Amount of Contribution (\$)	\$84.00
		6 Contributor address; City; State; Zip	Code			
	Dringing coor	Houston, TX 77042	6 Employer (See	Instructions)		
8	Physician	pation / Job title (See Instructions)	9 Employer (See	instructions)		
	Date	—	of-state PAC (ID#:		Amount of Contribution (\$)	
	08/29/2025	Kolle, Bracken				\$150.00
		Contributor address; City; State; Zip	Code			
		Houston, TX 77042				
	Principal occu	oation / Job title (See Instructions)	Employer (See	Instructions)		
	Physician					
	Date	Full name of contributor out-	of-state PAC (ID#:) <i>A</i>	Amount of Contribution (\$)	
	09/12/2025	Konvicka, James				\$84.00
		Contributor address; City; State; Zip	Code			
		Belton, TX 76513				
	Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)		
	Physician	,		,		
	Date	Full name of contributor Out-	of-state PAC (ID#:) /	Amount of Contribution (\$)	
	08/29/2025	Koons, Patrick			(+)	\$150.00
		Contributor address; City; State; Zip	Code			*
		Houston, TX 77042				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See	Instructions)		
	Date	Full name of contributor out-	of-state PAC (ID#:		Amount of Contribution (\$)	
	09/10/2025	Koppang, Erik				\$84.00
		Contributor address; City; State; Zip	Code			
		Fair Oaks, TX 78015				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See	Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 43/90 Rpt: 46/98	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$150.00
•	Dringing Loon	Houston, TX 77042	O Employer (Coo Instructions			
8	Physician Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	•)		
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID#:_ Kroger, John Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$84.00
	District	League City, TX 77573	Frankrije (O. a. kratinski ara	Ĺ		
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/04/2025	Full name of contributor out-of-state PAC (ID#:_ Kroger, John Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00
		League City, TX 77573				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID#:_ Kronberg, Gregory Contributor address; City; State; Zip Code Austin, TX 78733)		Amount of Contribution (\$)	\$100.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/08/2025	Full name of contributor out-of-state PAC (ID#:_Kronberg, Gregory Contributor address; City; State; Zip Code Austin, TX 78733			Amount of Contribution (\$)	\$100.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBU	HONS		SCHEDUL	E A1
	The Instruc	etion Guide explains how to complete th	his form.	1	Total pages Schedule A1: Sch: 44/90 Rpt: 47/98	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Texas Socie	y Of Anesthesiologists Political Action Commit	tee	L	00024940	
4	Date 08/29/2025		(ID#:)	7	Amount of Contribution (\$)	\$150.00
		6 Contributor address; City; State; Zip CodeHouston, TX 77056				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u>I</u> s)		
	Physician					
=	Date	Full name of contributor out-of-state PAC	(ID#:)	Т	Amount of Contribution (\$)	
	09/22/2025	Kwater, Andrzej			(,)	\$84.00
		Contributor address; City; State; Zip Code		1		
		, , , ,				
		Houston, TX 77009				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Physician					
	Date	Full name of contributor uut-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	08/29/2025	Lai, Chuong				\$150.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77023				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	e) 		
	Physician	sation, cost title (cost institutions)	Employer (God mondoners	٥,		
_	Date	Full name of contributor	/ID#:	Т	Amount of Contribution (\$)	
	08/29/2025	Lake, Yasmin Natasha	(ID#)		Amount of Contribution (\$)	\$150.00
	00/23/2023	Contributor address; City; State; Zip Code				Ψ130.00
		Contributor address, City, State, Zip Code				
		Houston, TX 77005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Physician					
	Date	Full name of contributor uut-of-state PAC	(ID#:)	Π	Amount of Contribution (\$)	
	08/29/2025	Lam, Bach				\$150.00
		Contributor address; City; State; Zip Code		1		
		League City, TX 77573				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Physician					

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 45/90 Rpt: 48/98	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor	_	7	Amount of Contribution (\$)	\$150.00
_	Deignaignal	Houston, TX 77042	In Francisco (Con Instructions			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_Langridge, Xuan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00
	Dringinal occu	Houston, TX 77079	Employer (See Instructions	_		
	Physician Physician	pation / Job title (See Instructions)	Employer (See Instructions	')		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Lasater, Matthew Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
		Katy, TX 77494				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/11/2025	Full name of contributor out-of-state PAC (ID#:_ Lasseter, Adam Contributor address; City; State; Zip Code Austin, TX 78704)		Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Lastoczy, Frank Contributor address; City; State; Zip Code Kingwood, TX 77345			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	()		
			•			

	MONEI	ARY POLITICAL CONT	RIBUTIONS		SCHEDU	LE A1
	The Instruc	ction Guide explains how to co	mplete this form.	1	Total pages Schedule A1: Sch: 46/90 Rpt: 49/98	
2	FILER NAME	Of A control of the Deliver Andre	. 0	3	Filer ID (Ethics Commission	on Filers)
		y Of Anesthesiologists Political Actio			00024940	
4	Date 08/29/2025	 Full name of contributor out-out-out-out-out-out-out-out-out-out-	Totale FAO (IDII).	7	Amount of Contribution (\$)	\$150.00
•	Dringing Local	Houston, TX 77070 pation / Job title (See Instructions)	Employer (See Instruction)	tions		
o	Physician	oation / Job title (See instructions)	9 Employer (See Instruc	uoris)		
	Date 08/29/2025	LeBlanc, Kelly Contributor address; City; State; Zip	f-state PAC (ID#:)	Amount of Contribution (\$)	\$150.00
		Houston, TX 77057	T			
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instruc	tions)		
	Date 09/09/2025	Full name of contributor out-out-out-out-out-out-out-out-out-out-	f-state PAC (ID#:		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78749				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instruc	tions)		
	Date 08/29/2025	Full name of contributor out-out-out-out-out-out-out-out-out-out-	f-state PAC (ID#:Code)	Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instruc	tions)		
	Date 09/08/2025	Full name of contributor out-out-out-out-out-out-out-out-out-out-)	Amount of Contribution (\$)	\$500.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instruc	tions)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 47/90 Rpt: 50/98	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Texas Socie	y Of Anesthesiologists Politica	I Action Committee			00024940	
4	Date 09/17/2025	5 Full name of contributor Lindberg, Scott	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$100.00
		6 Contributor address; City; Star					
_		Katy, TX 77494		1 (2 1 1 1	<u></u>		
8	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/29/2025	Lindberg, Scott					\$150.00
		Contributor address; City; Sta	te; Zip Code				
		Katy, TX 77494					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Physician						
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/29/2025	Lis, Thaddeus					\$150.00
		Contributor address; City; Sta	te; Zip Code				
		Houston, TX 77059					
		pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Physician						
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/10/2025	Littlejohn, Martin Contributor address; City; Sta	te; Zip Code				\$42.00
		San Antonio, TX 78254					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Г	Amount of Contribution (\$)	
	09/10/2025	Lockhart, Asa	_				\$100.00
		Contributor address; City; Sta	te; Zip Code				
		Tyler, TX 75703					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 48/90 Rpt: 51/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/08/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$500.00
_	Daine in a la casa	San Antonio, TX 78256	. Faralas a (Oas la drastica)			
8	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Loubser, Paul Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
	Deinsinal assu	Sugar Land, TX 77478	Franksia (Coo kashiristia na			
	Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Lu, Dai Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
		Houston, TX 77345				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Lu, Lingen Contributor address; City; State; Zip Code Houston, TX 77057			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Luehr, Susan Contributor address; City; State; Zip Code Houston, TX 77008)		Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 49/90 Rpt: 52/98	
2	FILER NAME Texas Societ	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/10/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$25.00
_		Houston, TX 77030				
8	Principal occur Physician	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#: Luong, Linh Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00
	Dringing Lagor	Houston, TX 77030	Franklauser (Coo la participale			
	Principal occul Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Madabhushi, Rangarajan Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
		Houston, TX 77057				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONEI	ARY POLITICAL CON		SCHEDULE A1			
	The Instru	ction Guide explains how to co	mplete this form.	1	Total pages Schedule A1: Sch: 50/90 Rpt: 53/98		
2	FILER NAME	Of Assessment Delivis of Assis		3	3 Filer ID (Ethics Commissio	n Filers)	
		y Of Anesthesiologists Political Action			00024940		
4	Date 09/10/2025	 Full name of contributor out Malviya, Sanjana Contributor address; City; State; Zip 	of-state PAC (ID#:		7 Amount of Contribution (\$)	\$125.00	
		Houston, TX 77007	Odde				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Er	nployer (See Instructions)			
	Date	Full name of contributor Out	of-state PAC (ID#:	<u>, </u>	Amount of Contribution (\$)		
	08/29/2025	Mankarious, Ramy	or state i Ae (ID#)	ranount of Continuation (4)	\$150.00	
	00/23/2023	Contributor address; City; State; Zip	Code			Ψ130.00	
		Houston, TX 77042					
	Principal occu	pation / Job title (See Instructions)	Fr	nployer (See Instructions)			
	Physician	odion / sob tile (See mandenons)	Li	ipioyer (oce instructions)			
	Date	Full name of contributor out	of-state PAC (ID#:		Amount of Contribution (\$)		
	09/08/2025	Manohar, Crystal				\$500.00	
		Contributor address; City; State; Zip	Code				
		Shavano Park, TX 78231					
	Principal occu	pation / Job title (See Instructions)	Er	nployer (See Instructions)			
	Physician						
	Date	Full name of contributor out	of-state PAC (ID#:		Amount of Contribution (\$)		
	09/09/2025	Marchal, Darren				\$250.00	
		Contributor address; City; State; Zip	Code				
		Allen, TX 75013					
	Principal occu	pation / Job title (See Instructions)	Er	nployer (See Instructions)			
	Physician						
	Date	Full name of contributor ut	of-state PAC (ID#:		Amount of Contribution (\$)		
	09/15/2025	Margolis, Mark				\$250.00	
		Contributor address; City; State; Zip	Code				
		Dallas, TX 75219					
	Principal occu	pation / Job title (See Instructions)	Er	nployer (See Instructions)			
	Physician						
			<u> </u>				

	MONEI	ARY POLITICAL CO	NTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 51/90 Rpt: 54/98	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Texas Socie	y Of Anesthesiologists Political A				00024940	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)			7	Amount of Contribution (\$)	#04.00
	09/12/2025	Markham, Travis	7:- O-1-				\$84.00
		6 Contributor address; City; State;	Zip Code				
_		Houston, TX 77030			Ĺ		
8	Principal occu Physician	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Martinez, Rogelio					\$150.00
		Contributor address; City; State;	Zip Code				
		San Antonio, TX 78256					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions)		
	Physician						
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/09/2025	Masel, Brian					\$84.00
		Contributor address; City; State;	Zip Code				
		Galveston, TX 77555					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Physician						
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Mastroianni, Maxwell Contributor address; City; State;	Zip Code				\$150.00
		Houston, TX 77479					
	Principal occu Physician	oation / Job title (See Instructions)		Employer (See Instructions	()		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Mathew, Anil					\$150.00
		Contributor address; City; State;	Zip Code				
		Bellaire, TX 77401					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	()		
			1				

	MONEI	ONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instruc	tion Guide explains how to complet	te this fo	rm.	1	Total pages Schedule A1: Sch: 52/90 Rpt: 55/98			
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)		
	Texas Socie	y Of Anesthesiologists Political Action Con	nmittee			00024940			
4	Date 08/29/2025	Full name of contributor out-of-state Mauritz, Amy	PAC (ID#:)	7	Amount of Contribution (\$)	\$150.00		
		6 Contributor address; City; State; Zip Code							
		Houston, TX 77042							
8	Principal occu Physician	pation / Job title (See Instructions)	,	9 Employer (See Instructions)				
	Date	Full name of contributor ut-of-state	PAC (ID#:)		Amount of Contribution (\$)			
	08/29/2025	Maxwell, Matthew	` _	,		· ,	\$150.00		
		Contributor address; City; State; Zip Code							
		Houston, TX 77009							
		pation / Job title (See Instructions)		Employer (See Instructions)				
	Physician								
	Date 09/08/2025	Full name of contributor out-of-state McAllister, Russell	PAC (ID#:)		Amount of Contribution (\$)	\$84.00		
	09/06/2023	Contributor address; City; State; Zip Code					Ψ04.00		
		. ,, , ,							
		Temple, TX 76508							
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)				
	Physician								
	Date	Full name of contributor ut-of-state	PAC (ID#:)		Amount of Contribution (\$)			
	09/08/2025	McClure, Matthew					\$250.00		
		Contributor address; City; State; Zip Code							
		Boerne, TX 78006							
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions)				
	Date	Full name of contributor out-of-state	PAC (ID#:)		Amount of Contribution (\$)			
	09/11/2025	McLeod, Christopher					\$21.00		
		Contributor address; City; State; Zip Code							
		Coppell, TX 75019							
		oation / Job title (See Instructions)		Employer (See Instructions)				
	Physician								

	MONEI	ARY POLITICAL C	ONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 53/90 Rpt: 56/98	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Texas Socie	y Of Anesthesiologists Politica				00024940	
08/29/2025 McMasters, Mark		out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$150.00	
		6 Contributor address; City; Sta	te; Zip Code				
_	Drive in all accord	Houston, TX 77057		O Francis von (Coo Instructions	$\overline{\Gamma}$		
8	Principal occu Physician	pation / Job title (See Instructions)		9 Employer (See Instructions	·)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/10/2025	McWilliams, Sara					\$84.00
		Contributor address; City; Sta	te; Zip Code				
		Boerne, TX 78006					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions	()		
	Physician						
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/10/2025	Mehta, Jaideep					\$84.00
		Contributor address; City; Sta	te; Zip Code				
		Austin, TX 78731			L		
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Physician						
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/12/2025	Merchun, Christopher					\$41.67
		Contributor address; City; Sta	te; Zip Code				
		Dallac TV 75210					
	Dringing con	Dallas, TX 75219 Dation / Job title (See Instructions)		Employer (Coo Instructions	<u></u>		
	Physician Physician	Jalion / Job lille (See Instructions)		Employer (See Instructions)		
	-	= 0	<u> </u>			A (O ' I ' . (A)	
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	#04.00
	09/15/2025	Mercier, David					\$84.00
		Contributor address; City; Sta	te; Zip Code				
		Dallas, TX 75229					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u></u>		
	Physician				,		
	, 5.5.6.6.1						

	MONET	ARY POLITICAL CONTRIBU	SCHEDULE A1			
	The Instru	ction Guide explains how to complete t	his form.	1	Total pages Schedule A1: Sch: 54/90 Rpt: 57/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Commit	ttee	3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/12/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$25.00
_	Duinning Langu	Houston, TX 77002	Contraction			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 08/29/2025	Full name of contributor out-of-state PAC Mey, Sokchea Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$150.00
	Dringing! goog	Pearland, TX 77584	Employer (See Instructions			
	Physician Physician	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 08/29/2025	Full name of contributor out-of-state PAC Michael, Sandra Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$150.00
		Houston, TX 77042				
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/12/2025	Full name of contributor out-of-state PAC Miller, Christopher Contributor address; City; State; Zip Code Arlington, TX 76015	C (ID#:)		Amount of Contribution (\$)	\$84.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/08/2025	Full name of contributor out-of-state PAC Miller, Christopher Contributor address; City; State; Zip Code Arlington, TX 76015	C (ID#:)		Amount of Contribution (\$)	\$84.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 55/90 Rpt: 58/98	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$150.00
0	Dringing con	Katy, TX 77494	Employer (See Instructions	_		
8	Physician Physician	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Mitchell, Karen Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
		Sugar Land, TX 77478				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Mitchell, Mena Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
		Houston, TX 77042				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Mitchell, Romy Contributor address; City; State; Zip Code Houston, TX 77006			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Mody, Rayomond Contributor address; City; State; Zip Code Bellaire, TX 77401)		Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 56/90 Rpt: 59/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission F 00024940	-ilers)
4	Date 09/09/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$20.00
_		Fort Worth, TX 76107				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/09/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1	.,000.00
	Principal occu Physician	Houston, TX 77005 Dation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID#:_ Moore, Adam Contributor address; City; State; Zip Code New Braunfels, TX 78132)		Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/04/2025	Full name of contributor out-of-state PAC (ID#:_ Moorman, Andrew Contributor address; City; State; Zip Code Dallas, TX 75219			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Mora, Ricardo Contributor address; City; State; Zip Code Houston, TX 77042			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
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	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 57/90 Rpt: 60/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/10/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$25.00
_	5	Conroe, TX 77304				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Date 09/11/2025	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$84.00
	Dringing age	Houston, TX 77007	Employer (Coo Instructions	_		
	Physician Physician	pation / Job title (See Instructions)	Employer (See Instructions	')		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Mujica Fernandez, Luis Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
		Houston, TX 77010				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Munga, Susan Contributor address; City; State; Zip Code Pasadena, TX 77503			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID#:_ Muro, Rene Contributor address; City; State; Zip Code El Paso, TX 79922			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	()		
		,				

	MONEI	ARY POLITICAL C	ONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 58/90 Rpt: 61/98	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		y Of Anesthesiologists Politica	_			00024940	
4	Date 08/29/2025	5 Full name of contributor Murray, Rebecca	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$150.00
		6 Contributor address; City; Star Spring, TX 77379	le, Zip Code				
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Physician						
_	Date	Full name of contributor	out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	09/10/2025	Murugan, Shobana					\$500.00
		Contributor address; City; Sta	te; Zip Code				
		Sugar Land, TX 77479					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>L</u>		
	Physician						
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/08/2025	Muse, Kenisha					\$84.00
		Contributor address; City; Star	te; Zip Code				
		Temple, TX 76502					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>L</u>		
	Physician						
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/29/2025	Mutyala, Chaitanya					\$150.00
		Contributor address; City; Star	te; Zip Code				
		Houston, TX 77042					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>L</u>		
	Physician						
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/29/2025	Nabi, Qaiser					\$150.00
		Contributor address; City; Sta	te; Zip Code				
		Houston, TX 77025					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> ;)		
	Physician	,		•			

	MONEI	ARY POLITICAL CONTRIBU	TIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	his form.	1	Total pages Schedule A1: Sch: 59/90 Rpt: 62/98	
2	FILER NAME	y Of Anesthesiologists Political Action Commit	ttee	1	Filer ID (Ethics Commission 00024940	n Filers)
_				╄		
4	Date 09/09/2025	 Full name of contributor uut-of-state PAC Naples, Joseph Contributor address; City; State; Zip Code 	(ID#:)	′	Amount of Contribution (\$)	\$250.00
		San Antonio, TX 78230				
8	Principal occu Physician	oation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor ut-of-state PAC	:(ID#:)		Amount of Contribution (\$)	
	08/29/2025	Narayan, Rakesh			· · ·	\$150.00
		Contributor address; City; State; Zip Code				,
		Bellaire, TX 77401	1			
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor ut-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	08/29/2025	Nasrallah, Kyle				\$150.00
		Contributor address; City; State; Zip Code				
		Kingwood, TX 77345				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Physician					
	Date	Full name of contributor ut-of-state PAC	: (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Nasser, Faiz Contributor address; City; State; Zip Code				\$150.00
		Pearland, TX 77584				
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	08/29/2025	Nazareth, Karl				\$150.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77046				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONEI	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 60/90 Rpt: 63/98	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		y Of Anesthesiologists Political Action Committee			00024940	
4	Date 09/12/2025	 Full name of contributor uut-of-state PAC (ID#: Nelson, Vincent Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$250.00
		Houston, TX 77007				
8		pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Physician					
	Date	Full name of contributor ut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/29/2025	Nguyen, Dominique				\$150.00
		Contributor address; City; State; Zip Code				
		Doorland TV 77594				
	Dringing con	Pearland, TX 77584	Employer (Coo Instructions)			
	Physician Physician	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date	Full name of contributor ut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/29/2025	Nguyen, Hoang				\$150.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77042				
	Dringinal accu	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
	Physician Physician	Jation / Job title (See instructions)	Employer (See instructions))		
		Full remark of contributors	<u> </u>		Amount of Contribution (f)	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢1E0.00
	08/29/2025	Nguyen, Huy Anh				\$150.00
		Contributor address; City; State; Zip Code				
		Richmond, TX 77407				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Physician					
	Date	Full name of contributor uut-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Nguyen, Jordan				\$150.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77046				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Physician	sales oob allo (oob mondono)	_mployer (occ mendenone)	,		
	, 5.5.4.1					

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 61/90 Rpt: 64/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/10/2025	 Full name of contributor out-of-state PAC (ID#: Normand, Katherine Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$84.00
_		Houston, TX 77079	1			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID#: Norrell, Stacy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00
	Principal occu	Magnolia, TX 77355 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	Physician	salon, cop line (coc mendellone)	Employer (See meadeache	,,		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Nwankwo, Chika Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
		Houston, TX 77042				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID#: Nwokolo, Omonele Contributor address; City; State; Zip Code Houston, TX 77030			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: O Garro Adeoti, Lasnette Contributor address; City; State; Zip Code Houston, TX 77042			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 62/90 Rpt: 65/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$150.00
_	Delin clin all a con-	Houston, TX 77042	lo 5l(0l			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID#:_Odeh, Jaffer Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$84.00
		Dallas, TX 75390	1	Ĺ		
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Odinkemelu, Didi Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
		Houston, TX 77042				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_Ohlman, Julie M. R. Contributor address; City; State; Zip Code Midland, TX 79705			Amount of Contribution (\$)	\$500.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_Ok, John Contributor address; City; State; Zip Code Dallas, TX 75251			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	;)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 63/90 Rpt: 66/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$150.00
8	Principal occu	Houston, TX 77055 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	Physician Date 08/29/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	Houston, TX 77007 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Oliverson, Thomas Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
		Cypress, TX 77429 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Physician Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Oluleye, Babajide Contributor address; City; State; Zip Code Houston, TX 77042)		Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_ Ombaba, Siang Contributor address; City; State; Zip Code San Antonio, TX 78260			Amount of Contribution (\$)	\$250.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONEI	ARY POLITICAL CON	NIRIBUTIO	INS		SCHEDUL	E A1
	The Instru	ction Guide explains how to c	complete this fo	orm.	1	Total pages Schedule A1: Sch: 64/90 Rpt: 67/98	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Texas Socie	y Of Anesthesiologists Political Ac	tion Committee			00024940	
4	Date 09/10/2025	 Full name of contributor	ut-of-state PAC (ID#:_ ip Code)	7	Amount of Contribution (\$)	\$84.00
		Houston, TX 77025					
8	Principal occu Physician	oation / Job title (See Instructions)		9 Employer (See Instructions)		
		Full name of contributor				Amount of Contribution (f)	
	Date 09/12/2025	Osborn, Matthew	ut-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	09/12/2025		······································				Φ25.00
		Contributor address; City; State; Z	ip Code				
		Seguin, TX 78155					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions)		
	Physician						
	Date	Full name of contributor on	ut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/29/2025	Osborn, Ronald					\$150.00
		Contributor address; City; State; Z	ip Code				
		Houston, TX 77005					
	Dringinal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>, </u>		
	Physician Physician	Jation / Job title (See mstructions)		Employer (See instructions)		
						A (Q ' L . ' (A)	
	Date	—	ut-of-state PAC (ID#:_)		Amount of Contribution (\$)	#04.00
	09/10/2025	Padakandla, Udaya					\$84.00
		Contributor address; City; State; Z	ip Code				
		Carrollton, TX 75010					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Physician						
	Date	Full name of contributor	ut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/10/2025	Pandya, Vrunda					\$84.00
		Contributor address; City; State; Z	ip Code				
		Boerne, TX 78006					
		oation / Job title (See Instructions)		Employer (See Instructions)		
	Physician						

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 65/90 Rpt: 68/98	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/09/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
0	Dringing occu	Dallas, TX 75204	D. Employer (See Instructions			
8	Physician Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	•)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:Parker, George Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
		Bellaire, TX 77401				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Pasdar-Shirazi, Francisco Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
		Houston, TX 77042				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:Patel, Purnal Contributor address; City; State; Zip Code Missouri City, TX 77459)		Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Paul, Jaison Contributor address; City; State; Zip Code Sugar Land, TX 77478)		Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		

	MONEI	ARY POLITICAL CONTRIBUTION)NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 66/90 Rpt: 69/98	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Texas Socie	y Of Anesthesiologists Political Action Committee			00024940	
4	Date 08/29/2025	 Full name of contributor out-of-state PAC (ID#: Pedley, Chad Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$150.00
		Houston, TX 77025				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Pena, Javier				\$150.00
		Contributor address; City; State; Zip Code				
		Conroe, TX 77384				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Physician					
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/12/2025	Perry, Jeremie				\$84.00
		Contributor address; City; State; Zip Code				
		Abilene, TX 79606				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Physician					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/10/2025	Peterson, Mary Dale				\$84.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78404				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date	Full name of contributor)		Amount of Contribution (\$)	
	09/09/2025	Peterson, Mary Dale	_			\$84.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78404				
		pation / Job title (See Instructions)	Employer (See Instructions	()		
	Physician					

	MONEI	ARY POLITICAL CONTR	IBUTIONS			SCHEDUL	E A1
	The Instruc	tion Guide explains how to comp	lete this form		1	Total pages Schedule A1: Sch: 67/90 Rpt: 70/98	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Texas Socie	y Of Anesthesiologists Political Action C	ommittee			00024940	
4	Date 09/08/2025	Full name of contributor out-of-star ou	ate PAC (ID#:)	7	Amount of Contribution (\$)	\$1,000.00
		6 Contributor address; City; State; Zip Cod	le				
		Dallas, TX 75219					
8	Principal occu Physician	pation / Job title (See Instructions)	9 E	mployer (See Instructions))		
	Date	Full name of contributor out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Pham, Huy					\$150.00
		Contributor address; City; State; Zip Cod	le				
		Houston, TX 77057					
	Principal occu Physician	pation / Job title (See Instructions)		mployer (See Instructions))		
	Date	Full name of contributor ut-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	09/10/2025	Phillips, Cooper					\$41.67
		Contributor address; City; State; Zip Cod	le				
		Lubbock, TX 79430					
	Principal occu Physician	pation / Job title (See Instructions)	E	mployer (See Instructions))		
	Date	Full name of contributor out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Pinsky, Jay Contributor address; City; State; Zip Cod	le				\$150.00
		Houston, TX 77096					
	Principal occu Physician	oation / Job title (See Instructions)	E	mployer (See Instructions))		
	Date	Full name of contributor out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	09/09/2025	Pivalizza, Evan					\$84.00
		Contributor address; City; State; Zip Cod	le				
		Tyler, TX 75708					
	Principal occu Physician	pation / Job title (See Instructions)	E	mployer (See Instructions))		
			•				

	MONEI	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 68/90 Rpt: 71/98	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
		y Of Anesthesiologists Political Action Committee			00024940	
4	Date 09/09/2025	 Full name of contributor uut-of-state PAC (ID# Plagenhoef, Deborah Contributor address; City; State; Zip Code 	:)	7	Amount of Contribution (\$)	\$1,000.00
		Southlake, TX 76092				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u>. </u>		
	Physician					
	Date	Full name of contributor uut-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	09/10/2025	Plagenhoef, Jeffrey				\$84.00
		Contributor address; City; State; Zip Code		1		
		Southlake, TX 76092				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>L</u> S)		
	Physician					
	Date	Full name of contributor uut-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	09/03/2025	Popat, Keyuri				\$100.00
		Contributor address; City; State; Zip Code				
		Pearland, TX 77584				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Physician					
	Date	Full name of contributor uut-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	08/29/2025	Porter, John				\$150.00
		Contributor address; City; State; Zip Code				
		Richmond, TX 77407				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Physician					
	Date	Full name of contributor ut-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	08/29/2025	Raghavan, Archana				\$150.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Physician					

	MONEI	ARY POLITICAL CONTRIBUTION	S	SCHEDULE A	41
	The Instru	ction Guide explains how to complete this form	m.	Total pages Schedule A1: Sch: 69/90 Rpt: 72/98	
2	FILER NAME		3	Filer ID (Ethics Commission File	ers)
		y Of Anesthesiologists Political Action Committee		00024940	
4	Date 09/15/2025	5 Full name of contributor out-of-state PAC (ID#: Rahlfs, Thomas		Amount of Contribution (\$)	83.34
		6 Contributor address; City; State; Zip Code			
		Houston, TX 77079			
8	Principal occu Physician	pation / Job title (See Instructions) 9	Employer (See Instructions)		
	Date	Full name of contributor		Amount of Contribution (\$)	
	08/29/2025	Ralston, A. Jacky		\$1	L50.00
		Contributor address; City; State; Zip Code			
		Houston, TX 77057			
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	L50.00
	08/29/2025	Ramesh, Rekha Contributor address; City; State; Zip Code		Ф1	150.00
		Continuator address, Gry, Grate, Elp Code			
		Houston, TX 77042			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Physician				
	Date	Full name of contributor uut-of-state PAC (ID#:)	Amount of Contribution (\$)	
	09/10/2025	Rane, Mihir		\$	84.00
		Contributor address; City; State; Zip Code			
		Dalas, TX 75209			
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date	Full name of contributor ut-of-state PAC (ID#:		Amount of Contribution (\$)	
	09/09/2025	Raphi, Ronse		\$	20.00
		Contributor address; City; State; Zip Code			
		Fort Worth, TX 76107			
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONEI	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1	
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 70/90 Rpt: 73/98		
2	FILER NAME			3	3 Filer ID (Ethics Commission Filers)		
	Texas Socie	y Of Anesthesiologists Political Action Committee			00024940		
4	Date 08/29/2025	 Full name of contributor out-of-state PAC (ID#: Rashid, Muhammad Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$150.00	
		Houston, TX 77042					
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	;)			
	Date 09/15/2025	Full name of contributor			Amount of Contribution (\$)	\$84.00	
		Austin, TX 78746					
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 09/08/2025	Full name of contributor out-of-state PAC (ID#: Rebello, Elizabeth Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00	
		Houston, TX 77005					
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	i)			
	Date 09/04/2025	Full name of contributor out-of-state PAC (ID#: Remster, Jeffrey Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00	
	Principal occu Physician	Dallas, TX 75206 Dation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$150.00	
		Contributor address; City; State; Zip Code Houston, TX 77042					
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CONTRIB	BUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complet	e this for	m.	1	Total pages Schedule A1: Sch: 71/90 Rpt: 74/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Com	nmittee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/12/2025	 Full name of contributor out-of-state F out-of-stat)	7	Amount of Contribution (\$)	\$84.00
_	Daine in all a con-	League City, TX 77573	la la	Frankrije (O. a. kastrosti and	<u></u>		
8	Principal occu Physician	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state Finey, Stephen Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
	Principal occu	Houston, TX 77005 pation / Job title (See Instructions)		Employer (See Instructions	·/		
	Physician Physician	oation / Job title (See Instructions)		Employer (See instructions	·)		
	Date 09/10/2025	Full name of contributor out-of-state F Rochkind, Jessica Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$84.00
		Galveston, TX 77551					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/10/2025	Full name of contributor out-of-state R Roland, Gavin Contributor address; City; State; Zip Code Missouri City, TX 77489)		Amount of Contribution (\$)	\$25.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/10/2025	Full name of contributor out-of-state F Rondeau, Bryan Contributor address; City; State; Zip Code Temple, TX 76502)		Amount of Contribution (\$)	\$83.34
	Principal occu Physician	oation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 72/90 Rpt: 75/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$150.00
8	Dringinal occu	Bellaire, TX 77401 pation / Job title (See Instructions)	Employer (See Instructions			
<u> </u>	Physician Physician	Jation / Job title (See Instructions)	e Employer (See Instructions	·)		
	Date 08/29/2025	Full name of contributor			Amount of Contribution (\$)	\$150.00
	Principal occu	Houston, TX 77057 pation / Job title (See Instructions)	Employer (See Instructions			
	Physician Physician	valion / 300 title (See instructions)	Employer (See instructions	')		
	Date 09/09/2025	Full name of contributor uut-of-state PAC (ID#:_ Rutland, Lindsey Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$84.00
		Austin, TX 78723				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID#:_Sachse, Kaylyn Contributor address; City; State; Zip Code Fair Oaks Ranch, TX 78015			Amount of Contribution (\$)	\$250.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_Saluja, Vijay Contributor address; City; State; Zip Code Frisco, TX 75035)		Amount of Contribution (\$)	\$41.67
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	i)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 73/90 Rpt: 76/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/11/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$62.50
_		Helotes, TX 78023	1			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/12/2025	Full name of contributor out-of-state PAC (ID#:_ Sarmiento, Stephen Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$85.00
	Principal occu	Plano, TX 75093 pation / Job title (See Instructions)	Employer (See Instructions) 		
	Physician	sation 7 oob title (See Mattactions)	Employer (See mandenons	')		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_ Schlegel, Levi Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
		Dallas, TX 75201				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Schoppa, Derek Contributor address; City; State; Zip Code Bellaire, TX 77401)		Amount of Contribution (\$)	\$150.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID#:_Scott, John Contributor address; City; State; Zip Code Keller, TX 76248)		Amount of Contribution (\$)	\$84.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	i)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 74/90 Rpt: 77/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/12/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$84.00
_	Daine in a la casa	Manvel, TX 77578				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_ Sen, Sudipta Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00
	Principal occu	Houston, TX 77025 pation / Job title (See Instructions)	Employer (See Instructions			
	Physician Physician	pation / Job title (See matractions)	Employer (See Instructions	,		
	Date 08/29/2025	Full name of contributor)		Amount of Contribution (\$)	\$150.00
		Houston, TX 77042				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:_ Serrato, Jorge Contributor address; City; State; Zip Code Laredo, TX 78045)		Amount of Contribution (\$)	\$750.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Shah, Tanmay Contributor address; City; State; Zip Code Sugar Land, TX 77479			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
		,				

	MONEI	ARY POLITICAL CON	VIRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to d	complete this fo	orm.	1	Total pages Schedule A1: Sch: 75/90 Rpt: 78/98	
2	FILER NAME				3	3 Filer ID (Ethics Commission Filers)	
	Texas Socie	y Of Anesthesiologists Political Ac	ction Committee			00024940	
4	Date 08/29/2025	5 Full name of contributor o Sheikh, Maria6 Contributor address; City; State; Z	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$150.00
		Houston, TX 77042					
8	Principal occu Physician	pation / Job title (See Instructions)		9 Employer (See Instructions)		
	Date	Full name of contributor o	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Shenoy, Vikram					\$150.00
		Contributor address; City; State; Z	Zip Code				
		Houston, TX 77024					
		oation / Job title (See Instructions)		Employer (See Instructions)		
	Physician						
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Shepard, Maria					\$150.00
		Contributor address; City; State; Z	Zip Code				
		Bellaire, TX 77401	<u>, </u>				
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	—	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/08/2025	Sheppard, Shaina Contributor address; City; State; Z	Zip Code				\$84.00
		Round Rock, TX 78664					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor 🔲 o	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Sheth, Milan					\$150.00
		Contributor address; City; State; Z	Zip Code				
		Sugar Land, TX 77479					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 76/90 Rpt: 79/98	
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$150.00
_	Dringing Loon	Pearland, TX 77584	O Employer (Coa Instructions			
8	Physician Physician	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor uut-of-state PAC (ID#:_ Shevchenko, Yevgeny Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
	Principal occu	Houston, TX 77082 pation / Job title (See Instructions)	Employer (See Instructions			
	Physician Physician	pation / Job title (See matrictions)	Employer (See instructions	,		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Shirak, Michelle Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
		Houston, TX 77008				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Shore, Brad Contributor address; City; State; Zip Code Bellaire, TX 77401			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/04/2025	Full name of contributor out-of-state PAC (ID#:_Shu, Stephen Contributor address; City; State; Zip Code Dallas, TX 75219			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
		,				

	MONEI	IONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to compl	ete this f	orm.	1	Total pages Schedule A1: Sch: 77/90 Rpt: 80/98		
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)	
	Texas Socie	y Of Anesthesiologists Political Action Co	ommittee			00024940		
4	Date	-	te PAC (ID#:_)	7	Amount of Contribution (\$)	4450.00	
	08/29/2025						\$150.00	
		6 Contributor address; City; State; Zip Code	е					
_	D: : 1	Spring, TX 77379		2 5 1 (2 1 1 1	Ĺ			
8	Principal occu Physician	oation / Job title (See Instructions)		9 Employer (See Instructions	i) 			
	Date	Full name of contributor uut-of-sta	te PAC (ID#:_)		Amount of Contribution (\$)		
	08/29/2025	Sims, Paul					\$150.00	
		Contributor address; City; State; Zip Code	е					
		Kingwood, TX 77325						
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	i)			
Date Full n		Full name of contributor out-of-sta	te PAC (ID#:_)		Amount of Contribution (\$)		
	08/29/2025	Sorkin, Tatiana					\$150.00	
		Contributor address; City; State; Zip Code	е					
	Delegale at a second	Houston, TX 77057		Farada a a (O a a la atau atia a a	<u></u>			
	Physician Physician	oation / Job title (See Instructions)		Employer (See Instructions)			
	Date	—	te PAC (ID#:_)		Amount of Contribution (\$)		
	09/09/2025	Spieker, John Contributor address; City; State; Zip Code	e				\$1,500.00	
		Dallas, TX 75218						
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Date	Full name of contributor out-of-sta	te PAC (ID#:_)		Amount of Contribution (\$)		
	08/29/2025	Sprockel, Dennis					\$150.00	
		Contributor address; City; State; Zip Code	е					
		Houston, TX 77079						
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 78/90 Rpt: 81/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/08/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$84.00
_		Sugar Land, TX 77479				
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/12/2025	Full name of contributor out-of-state PAC (ID#: Stamatakos, Todd Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$85.00
	Dringinal accu	Frisco, TX 75034 pation / Job title (See Instructions)	Employer (See Instructions			
	Physician Physician	oalion7 Job title (See Instructions)	Employer (See instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Stanosheck, Kyle Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
		Houston, TX 77057				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/10/2025	Full name of contributor out-of-state PAC (ID#:Street, Austin Contributor address; City; State; Zip Code Dallas, TX 75229			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Su, Young Contributor address; City; State; Zip Code Baytown, TX 77520)		Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 79/90 Rpt: 82/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$150.00
	Dringing Loon	Manvel, TX 77578	O Employer (Coo Instructions			
8	Physician Physician	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Tabor, Debra Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
	Delicalization	Houston, TX 77042	Frankrije (Ozakastinski	Ĺ		
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Tallackson, Donald Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
		Cypress, TX 77429				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Tanauli, Nasir Contributor address; City; State; Zip Code Bellaire, TX 77401			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		
	Date 09/09/2025	Full name of contributor out-of-state PAC (ID#:_ Taneja, Rishi Contributor address; City; State; Zip Code Dallas, TX 75230			Amount of Contribution (\$)	\$84.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	i)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 80/90 Rpt: 83/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$150.00
_	Deignigal	Katy, TX 77494	. Francis on (Con Instructions			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Taylor, Shakaala Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
	Dringing! goog	Humble, TX 77396	Employer (See Instructions	_		
	Physician Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Teegarden, Beth Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$62.50
		Galveston, TX 77555				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	<u>,</u>		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Teniola, Babajide Contributor address; City; State; Zip Code Houston, TX 77042)		Amount of Contribution (\$)	\$150.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#: Thommen, Prince Contributor address; City; State; Zip Code Bellaire, TX 77401			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 81/90 Rpt: 84/98		
2	FILER NAME Texas Socie	ry Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)	
4	Date 08/29/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$150.00	
8	Principal occu	Houston, TX 77025 pation / Job title (See Instructions)	9 Employer (See Instructions				
•	Physician	oduon 7 300 title (See mstructions)	3 Employer (See Instructions	,			
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Tom, Donald Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00	
	Principal occu	Houston, TX 77057 pation / Job title (See Instructions)	Employer (See Instructions)			
	Physician		Employer (eee meadeante	,			
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Tom, Robert Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00	
		Bellaire, TX 77401					
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 09/11/2025	Full name of contributor out-of-state PAC (ID#:_ Torres, Laura Contributor address; City; State; Zip Code Missouri City, TX 77459)		Amount of Contribution (\$)	\$259.00	
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_ Tran, An Duc Contributor address; City; State; Zip Code Houston, TX 77054)		Amount of Contribution (\$)	\$150.00	
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)			

MONETARY POLITICAL CONTRIBUTIONS				SCHEDUL	E A1	
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 82/90 Rpt: 85/98	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		y Of Anesthesiologists Political Action Committee			00024940	
4	Date 5 Full name of contributor out-of-state PAC (ID#:) O9/09/2025 Tran, Connie 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$250.00	
_	Discipal	Houston, TX 77063	2 Employ (Contraction)			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 08/29/2025 Trautmann, Johan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00	
		Houston, TX 77042				
Principal occupation / Job title (See Instructions) Employer (See Instruction Physician				5)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/10/2025 Tsai, January Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$84.00
		Houston, TX 77005				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
Date Full name of contributor out-of-state PAC (ID#:) 08/29/2025 Tu, Jo Contributor address; City; State; Zip Code Sugar Land, TX 77479				Amount of Contribution (\$)	\$150.00	
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)	<u>(</u>		
	Date Full name of contributor out-of-state PAC (ID#:) 08/29/2025 Vargheese, Ajay Contributor address; City; State; Zip Code Houston, TX 77057				Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)	5)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A		
	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 83/90 Rpt: 86/98	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		y Of Anesthesiologists Political Action C			00024940	
4	Date O9/08/2025 Full name of contributor out-of-state PAC (ID#:) Verheeck, Amanda 6 Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00	
8	Principal occu	Beaumont, TX 77702 pation / Job title (See Instructions)	9 Employer	(See Instructions)		
Ü	Physician	dation 7 ood title (occ mandetions)	2 Employer	(See instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/10/2025 Vidaurri, Lytorre Contributor address; City; State; Zip Code)	Amount of Contribution (\$)	\$84.00	
	5	Austin, TX 78726	1	(2 1 1 1 1)		
	Principal occupation / Job title (See Instructions) Employer (See Instruction Physician					
	Date Full name of contributor out-of-state PAC (ID#:) 08/29/2025 Vije, Hadassah Contributor address; City; State; Zip Code)	Amount of Contribution (\$)	\$150.00	
		Tomball, TX 77375				
	Principal occu Physician	pation / Job title (See Instructions)	Employer	(See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/09/2025 Vu, Catherine Contributor address; City; State; Zip Code Houston, TX 77030)	Amount of Contribution (\$)	\$250.00	
	Principal occu Physician	pation / Job title (See Instructions)	Employer	(See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 08/29/2025 Vu, Steve Contributor address; City; State; Zip Code Houston, TX 77042)	Amount of Contribution (\$)	\$150.00	
	Principal occu Physician	pation / Job title (See Instructions)	Employer	(See Instructions)		
			<u>.</u>			

MONETARY POLITICAL CONTRIBUTIONS				SCHEDUL	E A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 84/90 Rpt: 87/98		
2	FILER NAME	ov Of Aposthopialogists Delitical	Action Committee		3	Filer ID (Ethics Commission	n Filers)
_		y Of Anesthesiologists Political 5 Full name of contributor	_			00024940	
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 7		7	Amount of Contribution (\$)	\$100.00		
		Dallas, TX 75219					
8	Principal occu Physician	pation / Job title (See Instructions)		9 Employer (See Instructions	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Wagner, Chad	-				\$150.00
		Contributor address; City; State	e; Zip Code				
		Nashville, TN 37205					
Principal occupation / Job title (See Instructions) Employer (See Instruction				Employer (See Instructions	()		
	Physician						
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/25/2025 Waits, Alexandra				\$25.00		
		Contributor address; City; State	e; Zip Code				
		Houston, TX 77006					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/09/2025	Wajima, Yutaka Contributor address; City; State	e; Zip Code				\$84.00
		Austin, TX 78731					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/08/2025	Wajima, Yutaka					\$84.00
	Contributor address; City; State; Zip Code						
		Austin, TX 78731					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	i)		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to complet	te this for	m.	1	Total pages Schedule A1: Sch: 85/90 Rpt: 88/98		
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Con	nmittee		3	Filer ID (Ethics Commission 00024940	n Filers)	
4	Date 08/29/2025			7	Amount of Contribution (\$)	\$150.00		
8	Dringinal occu	Houston, TX 77042 pation / Job title (See Instructions)	ام	Employer (See Instructions	·/_			
0	Physician Physician	Janoi / Job title (See Instructions)	J	Employer (See instructions)			
	Date Full name of contributor out-of-state PAC (ID#:) 08/29/2025 Wang, Yaoyao Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00			
	Sugar Land, TX 77479				·/			
	Physician Physician	pation / Job title (See Instructions)		Employer (See Instructions)			
	Date Full name of contributor out-of-state PAC (ID#:) 08/29/2025 Waqar, Tahira Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00			
		Spring, TX 77379						
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Date 09/08/2025	Full name of contributor out-of-state Warters, Robert Contributor address; City; State; Zip Code Tyler, TX 75708	,)		Amount of Contribution (\$)	\$500.00	
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 09/17/2025 Wegner, Robert Contributor address; City; State; Zip Code Pearland, TX 77584			Amount of Contribution (\$)	\$84.00			
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions	5)			
			'					

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUI	E A1
	The Instru	ction Guide explains how to complete th	his form.	1	Total pages Schedule A1: Sch: 86/90 Rpt: 89/98	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Texas Socie	y Of Anesthesiologists Political Action Commit	tee		00024940	
4	Date 09/10/2025	 Full name of contributor out-of-state PAC Weiss, Lisa Contributor address; City; State; Zip Code 	(ID#:)	7 	Amount of Contribution (\$)	\$83.34
		Houston, TX 77018				
8	Principal occu Physician	oation / Job title (See Instructions)	9 Employer (See Instructions	ıs)		
	Date	Full name of contributor uut-of-state PAC	(ID#:)	Т	Amount of Contribution (\$)	
	09/09/2025	Wells, Allison			(-,	\$1,000.00
		Contributor address; City; State; Zip Code		-		, , , , , , , , , , , , , , , , , , , ,
		Houston, TX 77024				
		pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Physician					
	Date	Full name of contributor uut-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	08/27/2025 Wells, Kristen]		\$84.00	
		Contributor address; City; State; Zip Code				
		Addison, TX 75001				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Physician	,	, ,, (-,		
	Date	Full name of contributor ut-of-state PAC	(ID#:)	Т	Amount of Contribution (\$)	
	09/04/2025	West, Mary			`,	\$25.00
		Contributor address; City; State; Zip Code		-		
		L : TV 75004				
	Dringing Lagou	Irving, TX 75061	Francis var (Caa Inatriustian	<u> </u>		
	Physician Physician	oation / Job title (See Instructions)	Employer (See Instructions	is)		
	Date	Full name of contributor uut-of-state PAC	(ID#:)		Amount of Contribution (\$)	
	08/29/2025	Westerheide, William]		\$150.00
Contributor address; City; State; Zip Code						
		Kingwood, TX 77345				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Physician			-		
			l			

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 87/90 Rpt: 90/98	
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 08/29/2025			7	Amount of Contribution (\$)	\$150.00
_	Dringing Lagra	Houston, TX 77042	D. Frankrian (Con Instructions			
8	Principal occu Physician	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/10/2025 Whitman, Frances Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00	
	Principal occupation / Job title (See Instructions) Employer (See Instruction)					
	Physician Physician	oation / Job title (See instructions)	Employer (See Instructions	,		
	Date Full name of contributor out-of-state PAC (ID#:) 08/29/2025 Wilcox, Darrell Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00	
		Spring, TX 77389				
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/18/2025	Full name of contributor out-of-state PAC (ID#:_Williams, Wendell Contributor address; City; State; Zip Code Houston, TX 77007			Amount of Contribution (\$)	\$250.00
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/09/2025 Wood, Ashley Contributor address; City; State; Zip Code McKinney, TX 75072			Amount of Contribution (\$)	\$84.00	
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDUL	E A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 88/90 Rpt: 91/98		
2	FILER NAME Texas Socie	ty Of Anesthesiologists Politica	al Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)
4	Date 09/09/2025	te 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$84.00	
8		Dallas, TX 75390 pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/08/2025 Woods, Amy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$84.00		
	Dallas, TX 75390 Principal occupation / Job title (See Instructions) Employer (See Instruction Physician				<u> </u>		
	Date Full name of contributor out-of-state PAC (ID#:) 09/10/2025 Wortham, Barry Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00	
	Principal occu Physician	San Antonio, TX 78232 pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/08/2025	Full name of contributor Wortham, Barry Contributor address; City; Sta	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$100.00
	Principal occu Physician	pation / Job title (See Instructions)	1	Employer (See Instructions	<u> </u>		
	Date 08/29/2025	Full name of contributor Wright, Adam Contributor address; City; Sta	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$150.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDUL	E A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 89/90 Rpt: 92/98		
2	FILER NAME	Of Assessed assists Deliaised Ass	: Oi#		3	Filer ID (Ethics Commission	n Filers)
_		y Of Anesthesiologists Political Acti			_	00024940	
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 7 09/10/2025 Wright, Crystal 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$84.00		
		Houston, TX 77005					
8	Principal occu Physician	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date	Full name of contributor	t-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025	Xu, Wen Zhu				(,,	\$150.00
		Contributor address; City; State; Zi	p Code				
		Sugar Land, TX 77479					
Principal occupation / Job title (See Instructions) Employer (See Instruction Physician				Employer (See Instructions)		
	Date	Full name of contributor	t-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2025 Yang, Shawn				\$150.00		
		Contributor address; City; State; Zi	p Code				
		Sugar Land, TX 77479					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor u	t-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/10/2025	Yolland, Michael Contributor address; City; State; Zi	p Code				\$84.00
		Galveston, TX 77555					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor ou	t-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/09/2025	Youngblood, Jennifer					\$62.50
	Contributor address; City; State; Zip Code						
		Spring, TX 77389	<u>. </u>				
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 90/90 Rpt: 93/98		
2	FILER NAME Texas Socie	y Of Anesthesiologists Political Action Committee		3	Filer ID (Ethics Commission 00024940	n Filers)	
4	Date 09/10/2025			7	Amount of Contribution (\$)	\$75.00	
8	Principal occu	Houston, TX 77055 pation / Job title (See Instructions)	9 Employer (See Instructions	 			
_	Physician			,			
	Date Full name of contributor out-of-state PAC (ID#:) Zaafran, Sherif Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00		
		Houston, TX 77055					
Principal occupation / Job title (See Instructions) Physician Employer (See Instructions)							
	Date Full name of contributor out-of-state PAC (ID#:) 2akowski, Mark Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00		
		San Mateo, CA 94404					
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 08/29/2025	Full name of contributor out-of-state PAC (ID#:_Zarzour, David Contributor address; City; State; Zip Code Bellaire, TX 77401)		Amount of Contribution (\$)	\$150.00	
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions	5)			
Date Full name of contributor out-of-state PAC (ID#:) 2avala, Acsa Contributor address; City; State; Zip Code Houston, TX 77004			Amount of Contribution (\$)	\$250.00			
	Principal occu Physician	oation / Job title (See Instructions)	Employer (See Instructions	5)			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/5 Rpt: 94/98	Texas Society Of Anesthesiologists Political Action 00024940
4 Date	5 Payee name
09/10/2025	Abbott, Greg
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$15,000.00	P. O. Box 308
Expenditure from corporate funds	Austin, TX 78767
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
09/23/2025	Bell, Keith
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	P. O. Box 1178
Expenditure from corporate funds	Forney, TX 75126
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Campaign Continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	o
Date	Payee name
09/23/2025	Bumgarner, Ben
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	5150 Kensington Ct.
- Forest divine Cons	
Expenditure from corporate funds	Flower Mound, TX 75022
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
La Labitone	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/5 Rpt: 95/98	Texas Society Of Anesthesiologists Political Action 00024940
4 Date	5 Payee name
09/10/2025	Callas, Ray
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$25,000.00	5815 Walden Road
	PO Box 20032
Expenditure from corporate funds	Beaumont, TX 77720
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/16/2025	Cortez, Philip
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	7919 Liberty Island
Expenditure from corporate funds	San Antonio, TX 78227
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	- · · · · · · · · · · · · · · · · · · ·
Date	Payee name
09/23/2025	Flores, Pete
Amount (\$)	Payee address; City; State; Zip Code
\$3,000.00	1 E. Greenway Plaza
	Suite 225
Expenditure from corporate funds	Houston, TX 77046
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total manua Cabadula F1.	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1: Sch: 3/5 Rpt: 96/98	2 FILER NAME3 Filer ID(Ethics Commission Filers)Texas Society Of Anesthesiologists Political Action00024940
4 Date	5 Payee name
09/23/2025	Hinojosa , Adam
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3,000.00	P. O. Box 18301
Expenditure from corporate funds	Corpus Christi, TX 78480
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
5 .	
Date	Payee name
09/23/2025	Lalani, Suleman
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	P. O. Box 6514
Expenditure from corporate funds	Houston, TX 77265
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign Continuution
0 1: 0 1 2 2	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/23/2025	Little, Mitch
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	1505 Elm Street
, , ,	Suite 1601
Expenditure from	
corporate funds	Dallas, TX 75201
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Campaigh Continuation
Complete CNI V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/5 Rpt: 97/98	Texas Society Of Anesthesiologists Political Action 00024940
4 Date	5 Payee name
09/16/2025	Morales, Christina
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	PO Box 6514
Expenditure from corporate funds	Houston, TX 77265
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign Continuation
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
09/23/2025	Parker, Tan
Amount (\$)	Payee address; City; State; Zip Code
\$3,000.00	600 Parker Square
	Suite 250
Expenditure from corporate funds	Flower Mound, TX 75028
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign Continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	· ·
Date	Payee name
09/10/2025	Patterson, Jared
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	P. O. Box 5419
Expenditure from	
corporate funds	Frisco, TX 75035
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Sampaigh Continuation
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
•	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/5 Rpt: 98/98	Texas Society Of Anesthesiologists Political Action 00024940
4 Date	5 Payee name
09/23/2025	Virdell, Wes
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	P. O. Box 147
, _,	
Expenditure from corporate funds	Brady, TX 76825
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
LXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/16/2025	Ward, Charlene
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	PO Box 925775
Expenditure from corporate funds	Houston, TX 77292
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
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