FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00015622 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Optometric PAC Date Received **ELECTRONICALLY FILED** 10/06/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 3011 N. Lamar Ste 300 Austin, TX 78705 Date Hand-delivered or Date Postmarked CAMPAIGN MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount Ms. Brenda J. NAME Date Processed NICKNAME **SUFFIX** LAST BJ Date Imaged Avery CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 3011 N. Lamar STREET **ADDRESS** Ste 300 (Residence or Business) Austin, TX 78705 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** MAILING **ADDRESS CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 707-2020 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 X October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 08/26/2025 09/25/2025

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

L2 COMMITTEE NAME			13 Filer		(Ethics Commission Filers)
Texas Optometric PA	.C		0001	.5622	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Мосошись	A Supported			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAT OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	AN	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOAN	IS)	\$	25,485.60
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$	25,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE L G PERIOD	LAST DAY	\$	364,532.16
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS REPORTING PERIOD	S OF THE	\$	0.00
6 AFFIDAVIT	<u> </u>				
		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.			
		Ms. I	Brenda J. Av	ery	
			of Campaign		er
AFFIX NOTAR	RY STAMP / SEAL ABOVE				
Sworn to and subscrib	ed before me, by the said		, this the		day
		which, witness my hand and seal of office.			
Signature of officer	administering oath	Printed name of officer administering oath	Titla	of office	er administering oath
2.9	g outi	g Juliano di dining dani	1100	J. 511100	

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

					3 of 59
17 CO	MMITTE	EE NAME	18 Filer ID	(Ethics Commissio	n Filers)
Tex	kas Op	tometric PAC	00015622	•	,
		E SUBTOTALS			
l		SCHEDULE		SUBTOTAL A	MOUNT
				-	
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	25,485.60
					-,
,	\Box	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			
2.	Ш	\$			
3.	Ш	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
		COLUED III E OA. MONETADY CONTRIBUTIONS EDOM CORPORATION OR LANG			
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	PR .	\$	
5.	П	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR	\$	
	<u> </u>	LABOR ORGANIZATION			
	\Box	COLIEDURE CO. MONETARY CURRORT FROM CORRORATION OF LABOR ORG	ANUZATIONI		
6.	Ш	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR			
7.	Ш	ORGANIZATION		\$	
8.	П	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	 \$	
9.		SCHEDULE E: LOANS		\$	
]	ш	CONEDULE E. EO/MO		3	
10		COLUMN E 54. DOLUTION EVEN DELL'ES EDOM DOLUTION CONTRIBUTION	0		05 000 00
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	25,000.00
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	П	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		6	
15.	Ш	SCHEDGET4. EXPENDITORES WADE DI GREDIT CARD		\$	
14.	X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	10,252.50
		COLIED HE IV. INTEREST CREDITS CAINS RESUMBLE AND CONTRIBUTIONS	DETUDNED		
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	
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	MONEI	ARY POLITICAL C	ONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how t	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/53 Rpt: 4/59	
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	5 Full name of contributor	out-of-state PAC (ID#:_ e; Zip Code)	7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Helotes, TX 78023 pation / Job title (See Instructions)		9 Employer (See Instructions	 ;)		
	Optometrist Date 09/15/2025	Full name of contributor Alexander O.D., Lindsey Contributor address; City; Stat	out-of-state PAC (ID#:_ e; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 09/15/2025	Full name of contributor Ali O.D., Mohsan Contributor address; City; Stat	out-of-state PAC (ID#:_ e; Zip Code			Amount of Contribution (\$)	\$20.20
	Principal occu	Pearland, TX 77584 pation / Job title (See Instructions)		Employer (See Instructions) s)		
	Optometrist						
	Date 09/15/2025	Full name of contributor [Allen O.D., Mark Contributor address; City; Stat Atlanta, TX 75551	out-of-state PAC (ID#:_ e; Zip Code)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Date 09/15/2025	Full name of contributor Allison O.D., Joseph Contributor address; City; State Bryan, TX 77802	out-of-state PAC (ID#:_ e; Zip Code)		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONEI	ARY POLITICAL CONTR	KIBUTIO	ONS		SCHEDUL	E A1	
	The Instruc	ction Guide explains how to comp	olete this fo	orm.	1	1 Total pages Schedule A1: Sch: 2/53 Rpt: 5/59		
2	FILER NAME	notrio DAC			3	3 Filer ID (Ethics Commission Filers)		
_	Texas Opton				L	00015622		
4	Date 09/15/2025	Altig O.D., William	tate PAC (ID#:_		/	Amount of Contribution (\$)	\$400.00	
		Fort Worth, TX 76137						
8	Principal occu Optometrist	pation / Job title (See Instructions)		9 Employer (See Instructions	5)			
_	Date	Full name of contributor	tate PAC (ID#:_	1		Amount of Contribution (\$)		
	09/15/2025	Amador O.D., Nancy	iale FAC (ID#			Amount of Continuation (4)	\$100.00	
	03/13/2023	Contributor address; City; State; Zip Coo	de				Ψ100.00	
		Contributor additions, Only, Class, Elp Con	uo					
		Leander, TX 78641						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()			
	Optometrist							
	Date	Full name of contributor ut-of-st	tate PAC (ID#:_)		Amount of Contribution (\$)		
	09/15/2025	Amin O.D., Opal					\$50.00	
		Contributor address; City; State; Zip Cod	de					
		Austin, TX 78730						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>			
	Optometrist	,		ļ , . (,			
	Date	Full name of contributor out-of-st	tate PAC (ID#:_)		Amount of Contribution (\$)		
	09/15/2025	Anderson O.D., Vanessa				(,,	\$100.00	
		Contributor address; City; State; Zip Cod	de					
		, ,, , ,						
		Amarillo, TX 79109						
		pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Optometrist							
	Date	—	tate PAC (ID#:_)		Amount of Contribution (\$)		
	09/15/2025	Annunziato O.D., Tom					\$200.00	
		Contributor address; City; State; Zip Coo	de					
		Fort Worth, TX 76008						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	i)			
	Optometrist							
			ı					

	MONEI	ARY POLITICAL CONTR	IBUTION	NS		SCHEDULE	■ A1
	The Instru	ction Guide explains how to comp	lete this for	m.	1	Total pages Schedule A1: Sch: 3/53 Rpt: 6/59	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission Filers) 00015622	
_)	_		
4	Date 09/15/2025				7	Amount of Contribution (\$)	\$50.00
		Sugar Land, TX 77479					
8		oation / Job title (See Instructions)	9	Employer (See Instructions)		
	Optometrist						
	Date	—	ate PAC (ID#:)		Amount of Contribution (\$)	
	09/15/2025	Ballance O.D., Sherry					\$20.20
		Contributor address; City; State; Zip Cod	е				
		Cedar Park, TX 78613					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Optometrist	,		. , ,	•		
	Date	Full name of contributor out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	09/15/2025	Barajas O.D., Juan					\$50.00
		Contributor address; City; State; Zip Cod	e				
		·					
		Mission, TX 78572					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions)		
	Optometrist						
	Date	Full name of contributor out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	09/15/2025	Barber O.D., Matt		_			\$50.00
		Contributor address; City; State; Zip Cod	e				
		20.11.12a.to. aaa. 200, 21.5, 21.a.to, 2.p 20a					
		Ft. Worth, TX 76116-5525					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Optometrist						
	Date	Full name of contributor out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	09/15/2025	Barraza O.D., Jessica					\$30.00
		Contributor address; City; State; Zip Cod	e				
		Killeen, TX 76542					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Optometrist						
			1				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1	
	The Instruc	ction Guide explains how to complete this f	orm.	1	1 Total pages Schedule A1: Sch: 4/53 Rpt: 7/59		
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)	
4	Date 09/15/2025	 Full name of contributor out-of-state PAC (ID#:_Barrera O.D., Enedelia Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$50.00	
_	Deinsinal assu	Pharr, TX 78577	O Francisco (Con Instructions	$\overline{}$			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Bashover O.D., Matthew Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00	
	Principal occu	Arlington, TX 76011 pation / Job title (See Instructions)	Employer (See Instructions	_			
	Optometrist	oation / Job title (See matractions)	Employer (See manucuons	')			
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Bate O.D., Joy Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00	
		Haslet, TX 76052					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Bernay O.D., Deborah Contributor address; City; State; Zip Code La Porte, TX 77571			Amount of Contribution (\$)	\$200.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Bhaga O.D., Sheetal Contributor address; City; State; Zip Code Frisco, TX 75036			Amount of Contribution (\$)	\$100.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			

	MONET	ARY POLITICAL CONTRIBUTIONS		SCHEDUL	E A1
	The Instruc	etion Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 5/53 Rpt: 8/59	
2	FILER NAME Texas Opton		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	5 Full name of contributor out-of-state PAC (ID#:) Bock O.D., Matthew 6 Contributor address; City; State; Zip Code	7	Amount of Contribution (\$)	\$20.20
_	<u> </u>	Houston, TX 77063			
8	Optometrist	pation / Job title (See Instructions) 9 Employer (See Instructions))		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:) Brending O.D., Gabrielle Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$5.00
	Dringinal occu	Seabrook, TX 77586			
	Optometrist	pation / Job title (See Instructions) Employer (See Instructions))		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:) Brinegar O.D., Vaughn Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$20.20
		Cedar Park, TX 78613			
	Principal occu Optometrist	pation / Job title (See Instructions) Employer (See Instructions))		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:) Brochetti O.D., Brenda Contributor address; City; State; Zip Code Plano, TX 75075		Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions) Employer (See Instructions))		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:) Broussard O.D., Wendy Contributor address; City; State; Zip Code Beaumont, TX 77701		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions) Employer (See Instructions))		
		-			

	MONET	ARY POLITICAL CONTRIBUTION	S		SCHEDULI	E A1
	The Instruc	ction Guide explains how to complete this form	n.	1	Total pages Schedule A1: Sch: 6/53 Rpt: 9/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	ı Filers)
4	Date 09/15/2025	 Full name of contributor out-of-state PAC (ID#:	_	7	Amount of Contribution (\$)	\$400.00
_	Deignigal	Galveston, TX 77550	Franksian (Coo Instruction)			
8	Optometrist	pation / Job title (See Instructions) 9	Employer (See Instructions))		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Bryan O.D., Mai Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.20
	Principal occu	Houston, TX 77004 pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
	Optometrist		Employer (eee meadement)	,		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Bui O.D., Thoai Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Carrollton, TX 75007				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Butler O.D., W Contributor address; City; State; Zip Code Round Rock, TX 78681			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	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	form.	1	1 Total pages Schedule A1: Sch: 7/53 Rpt: 10/59		
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)	
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$20.00	
_	Dringing Lagra	Celina, TX 75009	O Francis or (Con Instructions	$\overline{}$			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Campbell O.D., Megan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$26.00	
		Celina, TX 75009		Ĺ			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	;)			
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Cargo O.D., Jon Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00	
		Irving, TX 75063					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Castleberry O.D., Kim Contributor address; City; State; Zip Code Plano, TX 75024)		Amount of Contribution (\$)	\$400.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Catuncan O.D., Jennifer Contributor address; City; State; Zip Code Bedford, TX 76022			Amount of Contribution (\$)	\$50.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)			

	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: 8/53 Rpt: 11/59	
2	FILER NAME	outin BAO			3	Filer ID (Ethics Commission	n Filers)
	Texas Opton					00015622	
4	Date 09/15/2025	5 Full name of contributor Celico O.D., Brian6 Contributor address; City; State;	out-of-state PAC (ID#: Zip Code		7	Amount of Contribution (\$)	\$50.00
		Dallas, TX 75231					
8	Principal occu Optometrist	pation / Job title (See Instructions)		9 Employer (See Instructions)		
		Full recover of contributors.				Δ	
	Date	—	out-of-state PAC (ID#:)		Amount of Contribution (\$)	#400.00
	09/15/2025	Cerda O.D., Juan					\$400.00
		Contributor address; City; State;	Zip Code				
		McAllen, TX 78501					
		pation / Job title (See Instructions)		Employer (See Instructions)		
	Optometrist						
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/15/2025	Chang O.D., Sarah					\$52.00
		Contributor address; City; State;	Zip Code				
		Houston, TX 77080					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Optometrist						
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/15/2025	Chen O.D., Alexander	_				\$100.00
		Contributor address; City; State;	Zip Code				
			p				
		Houston, TX 77004					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Optometrist						
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/15/2025	Cherry O.D., Brian	out or state 1710 (1211	/		7 mileant of Continuation (4)	\$200.00
		Contributor address; City; State;					,
		Contributor address, City, State,	Zip Code				
		Ft Worth, TX 76137					
	Principal occu	pation / Job title (See Instructions)	I	Employer (See Instructions)		
	Optometrist				,		

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 9/53 Rpt: 12/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$200.00
_	<u> </u>	Granbury, TX 76049	10.5 1 (0.1 1 11			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID Cheyne O.D., Chris Contributor address; City; State; Zip Code) #:)		Amount of Contribution (\$)	\$200.00
	Dringinal occu	Granbury, TX 76049	Employer (See Instruction	c)		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID Chu O.D., Victoria Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$52.00
		Austin, TX 78745				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID Cobb O.D., James Contributor address; City; State; Zip Code Amarillo, TX 79107)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID Coble O.D., John Contributor address; City; State; Zip Code Greenville, TX 75401			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	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: 10/53 Rpt: 13/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
_		Arlington, TX 76013	I			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Conley O.D., Alex Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Fort Worth, TX 76131				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Contaldi O.D., Mario Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$104.00
		N. Richland Hills, TX 76180				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Conte O.D., Michael Contributor address; City; State; Zip Code Lake Worth, TX 76135			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Cowan O.D., Steve Contributor address; City; State; Zip Code Amarillo, TX 79109			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	·)		
			,			

	MONET	ARY POLITICAL CONTRIB	UTION	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 11/53 Rpt: 14/59	
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor out-of-state Processing Cox O.D., Adam Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$50.00
8	Dringinal accu	Atlanta, TX 75551 pation / Job title (See Instructions)	l _o	Employer (See Instructions			
0	Optometrist	oation / Job title (See instructions)	9	Employer (See instructions	')		
	Date 09/15/2025	Full name of contributor out-of-state Proculbertson O.D., Wayne Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$50.00
		Dallas, TX 75225					
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state Production Dabney O.D., Brandon Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$100.00
		Amarillo, TX 79102					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state Pang O.D., Thuyhong Contributor address; City; State; Zip Code Houston, TX 77007	-)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state Propagation Dao O.D., Mavis Contributor address; City; State; Zip Code Pearland, TX 77584				Amount of Contribution (\$)	\$20.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	i)		
			, , , , , , , , , , , , , , , , , , ,				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 12/53 Rpt: 15/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor out-of-state PAC (ID#: Davis O.D., Mark Contributor address; City; State; Zip Code 	_	7	Amount of Contribution (\$)	\$100.00
_	<u> </u>	San Antonio, TX 78259	la = 1 (0 1 ; ii			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Dawn O.D., Rakich Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		San Antonio, TX 78215	1			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Day, Jr O.D., Bob Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00
		Garland, TX 75041				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: DeLoach O.D., Joe Contributor address; City; State; Zip Code Dallas, TX 75219			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: DeMaggio O.D., Julie Contributor address; City; State; Zip Code Mansfield, TX 76063			Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDUL	E A1
	The Instruc	etion Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 13/53 Rpt: 16/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
_	Deire sin al access	Garland, TX 75042	S. Faralana (One back at the			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instruction:	is)		
	Date 09/15/2025	Full name of contributor out-of-state PAC Deakins O.D., Jennifer Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$200.00
		Fort Worth, TX 76135		<u> </u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instruction:	1S)		
	Date 09/15/2025	Full name of contributor out-of-state PAC Delay O.D., Richard Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$200.00
		Boerne, TX 78015				
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instruction:	ıs)		
	Date 09/15/2025	Full name of contributor out-of-state PAC of Delk O.D., Kyle Contributor address; City; State; Zip Code Port Neches, TX 77651	(ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruction	ns)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (Dennis O.D., Keith Contributor address; City; State; Zip Code Round Rock, TX 78664	(ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruction	ns)		
			·			

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 14/53 Rpt: 17/59	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	5 Full name of contributor Dinh O.D., David6 Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code)	7	Amount of Contribution (\$)	\$100.00
_	Deinsinal	Dallas, TX 75206	1.	2. Farada e a (Carada atrostica)			
8	Optometrist	pation / Job title (See Instructions)	·	9 Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor Dolce O.D., Jackson Contributor address; City; Sta)		Amount of Contribution (\$)	\$5.20
	Dringinal occu	Port Neches, TX 77651 pation / Job title (See Instructions)		Employer (See Instructions	·/_		
	Optometrist	pation / 300 title (See Instructions)		Employer (See instructions	·)		
	Date 09/15/2025	Full name of contributor Dunnigan O.D., Shawn Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code)	•	Amount of Contribution (\$)	\$200.00
		Lumberton, TX 77657					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor Duong O.D., Nghiem Contributor address; City; Sta)		Amount of Contribution (\$)	\$75.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor Ellis O.D., John Contributor address; City; Sta	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL CONTRIBUTIONS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 15/53 Rpt: 18/59	
2	FILER NAME Texas Optor	netric PAC	3	Filer ID (Ethics Commission Filer ID 00015622	ilers)
4	Date 09/15/2025	 Full name of contributor out-of-state PAC (ID#: Ermis O.D., Keith Contributor address; City; State; Zip Code 		Amount of Contribution (\$)	\$50.00
8	Principal occu	Wharton, TX 77488 pation / Job title (See Instructions) 9 En	mployer (See Instructions)		
•	Optometrist				
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Ezzell O.D., Steven Contributor address; City; State; Zip Code)	Amount of Contribution (\$)	\$52.00
		Abilene, TX 79601			
	Principal occu Optometrist	pation / Job title (See Instructions)	mployer (See Instructions)		
	Date 09/15/2025	Full name of contributor		Amount of Contribution (\$)	\$20.20
	Deinsinal assu	Huntingtown, MD 20639			
	Optometrist	pation / Job title (See Instructions)	mployer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Fleitman O.D., Cynthia Contributor address; City; State; Zip Code Gainesville, TX 76240		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	mployer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Flores O.D., Amador Contributor address; City; State; Zip Code Laredo, TX 78041		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	mployer (See Instructions)		
		•			

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to co	omplete this form	n.	1	Total pages Schedule A1: Sch: 16/53 Rpt: 19/59	
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor out-			7	Amount of Contribution (\$)	\$100.00
_	Deinainal assu	Helotes, TX 78023	la la	Franks voy (Coo la structiona			
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out- Gamini O.D., Safi Contributor address; City; State; Zip	of-state PAC (ID#:			Amount of Contribution (\$)	\$20.20
		Plano, TX 75093					
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out- Garcia Holle O.D., Laura Contributor address; City; State; Zip	of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
		San Angelo, TX 76904					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out- Garcia O.D., Claudia Contributor address; City; State; Zip Houston, TX 77081	-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/15/2025	Garza O.D., Janet	of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / 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: 17/53 Rpt: 20/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$400.00
8	Principal occur	Missouri City, TX 77459 pation / Job title (See Instructions)	Employer (See Instructions	_		
0	Optometrist	Salion 7 300 title (See Instructions)	Employer (See instructions	')		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Gibson O.D., David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00
		Lubbock, TX 79423				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Graham Hayter O.D., Paul Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$200.00
		Irving, TX 75063				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:Gray O.D., David Contributor address; City; State; Zip Code Midland, TX 79705)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Gray O.D., Jeannie Contributor address; City; State; Zip Code Midland, TX 79705)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
		1				

	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: 18/53 Rpt: 21/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
_		San Antonio, TX 78212		<u></u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Greeman O.D., Kevin Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
	Dringing aggr	San Antonio, TX 78212	Employer (See Instructions	<u>''</u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	·)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Green O.D., Leigh Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$100.00
		Woodway, TX 76712				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Greene O.D., Matthew Contributor address; City; State; Zip Code College Station, TX 77845			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Greenstein O.D., Karena Contributor address; City; State; Zip Code Dallas, TX 75216			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CO	MIRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 19/53 Rpt: 22/59	
2	FILER NAME	tri- DAG			3	Filer ID (Ethics Commission	n Filers)
	Texas Opton					00015622	
4	Date 09/15/2025	Full name of contributorHall O.D., JamieContributor address; City; State	out-of-state PAC (ID#:_ ; Zip Code		7	Amount of Contribution (\$)	\$20.20
		Wills Point, TX 75169					
8	Principal occu Optometrist	oation / Job title (See Instructions)		9 Employer (See Instructions	()		
	Date	Full name of contributor	1 out of state DAC (ID#)	`		Amount of Contribution (\$)	
	09/15/2025	Hammond O.D., Deanna	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$400.00
	09/13/2023						Φ400.00
		Contributor address; City; State	; Zip Code				
		Grand Prairie, TX 75052					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>. </u>		
	Optometrist	,		. , ,	,		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/15/2025	Hammond O.D., Eric					\$100.00
		Contributor address; City; State	; Zip Code				
		Austin, TX 78750	-				
		pation / Job title (See Instructions)		Employer (See Instructions	()		
	Optometrist						
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/15/2025	Hanson O.D., Mark					\$100.00
		Contributor address; City; State	; Zip Code				
		Arlington, TX 76012					
		pation / Job title (See Instructions)		Employer (See Instructions	()		
	Optometrist						
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/15/2025	Harper O.D., Ellener					\$20.20
		Contributor address; City; State	; Zip Code				
		Fort Worth, TX 76131					
		oation / Job title (See Instructions)		Employer (See Instructions	()		
	Optometrist						

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 20/53 Rpt: 23/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor out-of-state PAC (ID Hart O.D., Peggy Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$50.00
_	<u> </u>	Houston, TX 77079	10.5 1 10 11 11	Ĺ		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID Harvey O.D., Cameo Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$20.20
	Principal occu	Abilene, TX 79605 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Optometrist	oution / Job title (Jee mandenons)	Employer (See msu denons	3)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID Hawari O.D., Andy Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Mineola, TX 75773				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID Hawkins O.D., Heidi Contributor address; City; State; Zip Code Amarillo, TX 79109)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID Heeg O.D., Paul Contributor address; City; State; Zip Code Coppell, TX 75019	#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 21/53 Rpt: 24/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
_		Miles, TX 76861	1	Ţ		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (In Helbert-Green O.D., Carolyn Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$100.00
	Dringing! goog	Colleyville, TX 76034	Employer (See Instruction			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (I Henry O.D., Amy Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$100.00
		Victoria, TX 77904				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (I Hoang O.D., Bao Contributor address; City; State; Zip Code Katy, TX 77494	D#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (Industry Contributor address; City; State; Zip Code Katy, TX 77494	D#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRIBUTIONS	S	SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this form	ı. ¹	Total pages Schedule A1: Sch: 22/53 Rpt: 25/59	
2	FILER NAME Texas Opton	netric PAC	3	3 Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7 Amount of Contribution (\$)	\$100.00
_		Friendswood, TX 77546			
8	Principal occu Optometrist	pation / Job title (See Instructions) 9	Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Hutchins O.D., Jaclyn Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$50.00
	Principal occu	San Antonio, TX 78257 pation / Job title (See Instructions)	Employer (See Instructions)		
	Optometrist	,	, , , ,		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Huynh O.D., Hieu Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$50.00
		Dallas, TX 75240			
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Jacob O.D., Erin Contributor address; City; State; Zip Code Lockhart, TX 78664		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Johle O.D., Sarah Contributor address; City; State; Zip Code Hutto, TX 78634		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	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 fo	orm.	1	Total pages Schedule A1: Sch: 23/53 Rpt: 26/59	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Texas Opton				L	00015622	
4	Date 09/15/2025	5 Full name of contributor	out-of-state PAC (ID#:_ te; Zip Code)	7	Amount of Contribution (\$)	\$400.00
8	Principal occu	Dallas, TX 75287 pation / Job title (See Instructions)		Employer (See Instructions	(s)		
•	Optometrist			2 - Improyor (Goo mondonono	,		
	Date 09/15/2025	Full name of contributor Jones O.D., Jeffrey Contributor address; City; Star	out-of-state PAC (ID#:_ ie; Zip Code			Amount of Contribution (\$)	\$100.00
		Longview, TX 75605			L		
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor [Jordan O.D., Emily Contributor address; City; Star	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00
		Austin, TX 78746					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 09/15/2025	Full name of contributor Karanges O.D., Gayle Contributor address; City; State Arlington, TX 76005	out-of-state PAC (ID#:_ e; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Date 09/15/2025	Full name of contributor Kelly O.D., Shawn Contributor address; City; Star	out-of-state PAC (ID#:_ e; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu Accountant	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 24/53 Rpt: 27/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
_	Deinsinal assu	Houston, TX 77015-2310	Continue (Continue tinue			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID# Knight O.D., Millicent Contributor address; City; State; Zip Code	:		Amount of Contribution (\$)	\$100.00
	Dringinal occu	Plano, TX 75093	Employer (See Instructions	·/		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	·)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID# Kocian O.D., Larry Contributor address; City; State; Zip Code	t:)		Amount of Contribution (\$)	\$104.00
		Harker Heights, TX 76548				
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID# Kodukula O.D., Dipa Contributor address; City; State; Zip Code Austin, TX 78717	t:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID# Kuder O.D., Bryan Contributor address; City; State; Zip Code Carrollton, TX 75007			Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
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	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 25/53 Rpt: 28/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$400.00
_	Deinsinal sass	The Woodlands, TX 77382	O Francisco (Con Instructions	_		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Lam O.D., Sean Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.20
	Dringing! aggs	Houston, TX 77075	Employer (Coo Instructions	_		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Lambert O.D., Sawyer Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Houston, TX 77008				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Larry O.D., Gunnell Contributor address; City; State; Zip Code Witchita Falls, TX 76308)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Le O.D., Anne Contributor address; City; State; Zip Code Houston, TX 77072			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this 1	orm.	1	Total pages Schedule A1: Sch: 26/53 Rpt: 29/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor out-of-state PAC (ID#: Le O.D., Anne Contributor address; City; State; Zip Code 	_	7	Amount of Contribution (\$)	\$100.00
0	Dringing con	Houston, TX 77072	6 Employer (See Instructions			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Le O.D., Hoan Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
	Principal occu	Spring, TX 76135 pation / Job title (See Instructions)	Employer (See Instructions) 		
	Optometrist	oduon 7 300 tute (300 matucalons)	Employer (See manucuons	')		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Le O.D., Kevin Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
		Houston, TX 77054				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Le O.D., Lisa Contributor address; City; State; Zip Code Missouri City, TX 77459			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Linh O.D., Linh Contributor address; City; State; Zip Code Leander, TX 78641			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
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	MONEI	ARY POLITICAL CONTRIBUTION)NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 27/53 Rpt: 30/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
8	Principal occu Optometrist	Cedar Park, TX 78613 Dation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> 5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Lucas O.D., Thomas Contributor address; City; State; Zip Code Harker Heights, TX 76548			Amount of Contribution (\$)	\$400.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Mai O.D., Kelly Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Cypress, TX 77433				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Maldonado O.D., Michael Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	El Paso, TX 79902 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Maldonado O.D., Nicole Contributor address; City; State; Zip Code San Antonio, TX 78249			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / 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	form.	1	Total pages Schedule A1: Sch: 28/53 Rpt: 31/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
_		San Antonio, TX 78504	10 5 1 (0 1 1 1	_		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID# Martin O.D., Michal Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$50.00
	Drincinal occu	Austin, TX 78735 pation / Job title (See Instructions)	Employer (See Instructions	·)		
	Optometrist	Jalion / Job lilie (See instructions)	Employer (See Instructions	·)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID# Martinez O.D., Michelle Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$100.00
		Ft. Worth, TX 76244	1	L		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID# Masters O.D., Trishna Contributor address; City; State; Zip Code Arlington, TX 76006	:)	•	Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID# McCarty O.D., Dennis Contributor address; City; State; Zip Code Cedar Park, TX 78613			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / 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	rm.	1	Total pages Schedule A1: Sch: 29/53 Rpt: 32/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$50.00
_	Delicalization	Austin, TX 78759	2. Europhysian (Constructions	Ĺ		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor			Amount of Contribution (\$)	\$100.00
		Gatesville, TX 76528				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: McDaniel O.D., Stephen Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		DallaS, TX 75208				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_McGowan O.D., Joseph Contributor address; City; State; Zip Code AUSTIN, TX 78748-1051			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ McPherson O.D., Kimberly Contributor address; City; State; Zip Code North Richland Hills, TX 76180			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
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	MONET	ARY POLITICAL CONTRIBUT	ΓIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 30/53 Rpt: 33/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$400.00
_	<u> </u>	Huntsville, TX 77340		<u> </u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (Montgomery O.D., Brandi Contributor address; City; State; Zip Code	ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	Missouri City, TX 77459 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (Moon O.D., Deborah Contributor address; City; State; Zip Code Plano, TX 75024	ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (Moore O.D., Tory Contributor address; City; State; Zip Code Dumas, TX 79029			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (Mora O.D., David Contributor address; City; State; Zip Code Laredo, TX 78043	ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
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	MONET	ARY POLITICAL CONTR	IBUTION	IS		SCHEDUL	E A1
	The Instruc	etion Guide explains how to comp	lete this for	m.	1	Total pages Schedule A1: Sch: 31/53 Rpt: 34/59	
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor out-of-star out-o)	7	Amount of Contribution (\$)	\$50.00
_	Deinsinal assu	San Antonio, TX 78240	la la	Frankrija (Carl Instructions	_		
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 09/15/2025	Mozdbar O.D., Sima				Amount of Contribution (\$)	\$20.20
	Principal occu	Austin, TX 78750 pation / Job title (See Instructions)		Employer (See Instructions) 		
	Optometrist	(,		
	Date 09/15/2025	Full name of contributor out-of-sta Munson O.D., Kevin Contributor address; City; State; Zip Code	ate PAC (ID#:			Amount of Contribution (\$)	\$100.00
		Melissa, TX 75454					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/15/2025	Murrell O.D., Jessica)		Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/15/2025	Newman O.D., Clarke	ate PAC (ID#:			Amount of Contribution (\$)	\$400.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	i)		
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	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 32/53 Rpt: 35/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor out-of-state PAC (ID: Newton O.D., Ronald Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$100.00
_		Laredo, TX 78040		Ĺ		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID: Nguyen O.D., Hai Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$50.00
	Deinsinal assu	Portland, TX 78374	Family on (Cook Instructions	<u></u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID: Nguyen O.D., Jenifer Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$50.00
		Addison, TX 75001				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID: Nguyen O.D., Quan Contributor address; City; State; Zip Code Houston, TX 77072	#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID: Nguyen O.D., Steve Contributor address; City; State; Zip Code Dallas, TX 75224	#:)		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CON	NTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to c	complete this form	n.	1	Total pages Schedule A1: Sch: 33/53 Rpt: 36/59	
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor o)	7	Amount of Contribution (\$)	\$100.00
_		Dallas, TX 75206					
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor on Nguyen O.D., Tu Contributor address; City; State; Z	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Cypress, TX 77429					
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor on Nguyen O.D., Vicki Contributor address; City; State; Z	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Grand Prairie, TX 75054					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor on the original of the original of the original of the original orig	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/15/2025	O'Brien O.D., Lisa	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
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	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: 34/53 Rpt: 37/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Highland Village, TX 75077 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Optometrist	Janoi 17 Job line (See Instructions)	Employer (See Instructions	')		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Park O.D., Jon Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Delicalization	Irving, TX 75063	Fundamental	Ĺ		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Pass O.D., Hulon Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Fort Stockton, TX 79735				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Pass O.D., Joshua Contributor address; City; State; Zip Code Fort Stockton, TX 79735			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Patel O.D., Ajay Contributor address; City; State; Zip Code Frisco, TX 75035			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 35/53 Rpt: 38/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor out-of-state PAC (I Patel O.D., Hiten Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$200.00
0	Dringing agg	Kerrville, TX 78028	Employer (See Instruction			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (Patel O.D., Nimisha Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$20.20
	Principal occu	Houston, TX 77027 pation / Job title (See Instructions)	Employer (See Instructions	e)		
	Optometrist	oution 7 300 title (See instructions)	Employer (See Instructions	3)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (I Patel O.D., Samir Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$200.00
		Beaumont, TX 77706				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (Patrick O.D., Carey Contributor address; City; State; Zip Code Allen, TX 75002	D#:)		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (In Pena O.D., Benny Contributor address; City; State; Zip Code Kerrville, TX 78028	D#:)		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
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	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: 36/53 Rpt: 39/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$52.00
_	Deire sin al access	Georgetown, TX 78628	2. Evaluation (Construction	Ĺ		
8	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Perez O.D., Elizabeth Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Beeville, TX 78102				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Peterson O.D., Christopher Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Carrolton, TX 75006				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Peterson O.D., Savannah Contributor address; City; State; Zip Code Webster, TX 77598			Amount of Contribution (\$)	\$26.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Philip O.D., Blessy Contributor address; City; State; Zip Code Coppell, TX 75019)		Amount of Contribution (\$)	\$20.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
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	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 37/53 Rpt: 40/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
_	Deire sin al access	Texarkana, TX 75503	S. Faralana (One basic attention			
8	Optometrist	oation / Job title (See Instructions)	9 Employer (See Instructions	is)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (Pierce O.D., Jordan Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$50.00
		Fort Worth, TX 76177	1	Ļ		
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	is)		
	Date 09/15/2025	Full name of contributor out-of-state PAC Pillai O.D., Anith Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$100.00
		Sugarland, TX 77479				
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 09/15/2025	Full name of contributor out-of-state PAC Poole O.D., Mohan Contributor address; City; State; Zip Code Marble Falls, TX 78654	(ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 09/15/2025	Full name of contributor out-of-state PAC of Prapta O.D., Shawn Contributor address; City; State; Zip Code Mansfield, TX 76063	(ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	is)		
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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: 38/53 Rpt: 41/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
_	Deignaignal	Houston, TX 77058	O Franklavar (Caa Instructions	<u></u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Proske O.D., Paul Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Spring, TX 77379				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Raley O.D., Audrey Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		New Braunfels, TX 78132				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Ramirez O.D., Juan Contributor address; City; State; Zip Code Mission, TX 78573			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Ramirez-Shank O.D., Diane Contributor address; City; State; Zip Code San Antonio, TX 78232)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / 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: 39/53 Rpt: 42/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$50.00
_	Daine in a la casa	Friendswood, TX 77546	O Family and (October to attraction			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Reneau O.D., Aaron Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Kingwood, TX 77345 pation / Job title (See Instructions)	Employer (See Instructions	.) 		
	Optometrist	odition / Job title (See Instructions)	Employer (See instructions	')		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Reynolds O.D., Samantha Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$52.00
		Haslet, TX 76052				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Robertson O.D., Reid Contributor address; City; State; Zip Code Allen, TX 75013			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Robertson O.D., Reid Contributor address; City; State; Zip Code Allen, TX 75013			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 40/53 Rpt: 43/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor out-of-state PAC (IE Robinson O.D., Beth Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Friendswood, TX 77546 pation / Job title (See Instructions)	9 Employer (See Instructions	c)		
0	Optometrist	Janott / Job title (See Instructions)	9 Employer (See instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (IE Robinson O.D., Nathaniel Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	Lufkin, TX 75904 pation / Job title (See Instructions)	Employer (See Instructions	e)		
	Optometrist	oation / Job title (See Instructions)	Employer (See instructions	3)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (IE Rodriguez O.D., Jaime Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$50.00
		Weslaco, TX 78596				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (IE Rojas O.D., Luis Contributor address; City; State; Zip Code Dallas, TX 75204) 		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (IE Rosemore O.D., Corey Contributor address; City; State; Zip Code Frisco, TX 75035	D#:)		Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
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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: 41/53 Rpt: 44/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
_		Frisco, TX 75033				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Salchak O.D., Robert Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Delicalization	Sugarland, TX 77479		Ĺ		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Sandberg O.D., Kyle Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		San Antonio, TX 78229				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Sappington O.D., Amanda Contributor address; City; State; Zip Code Amarillo, TX 79119)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_Sawhney O.D., Dimple Contributor address; City; State; Zip Code Austin, TX 78723			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBU	UTIONS		SCHEDUL	E A1
	The Instruc	etion Guide explains how to complete	this form.	- 1	Total pages Schedule A1: Sch: 42/53 Rpt: 45/59	
2	FILER NAME Texas Opton	netric PAC		- 1	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor out-of-state PA Segu O.D., Pat Contributor address; City; State; Zip Code 	,	7 /	Amount of Contribution (\$)	\$50.00
_		Missouri City, TX 77459	T			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	ns)		
	Date 09/15/2025	Full name of contributor out-of-state PA Shandley O.D., Brian Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$400.00
	Dringing Lagor	Lake Jackson, TX 77566	Familia (av./Co.a. la aku jaki an			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	is)		
	Date 09/15/2025	Full name of contributor out-of-state PA Shannon O.D., Bridget Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$50.00
		Frisco, TX 75035				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 09/15/2025	Full name of contributor out-of-state PA Shauger O.D., Susan Contributor address; City; State; Zip Code Austin, TX 78727	AC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 09/15/2025	Full name of contributor out-of-state PA Shidlofsky O.D., Charles Contributor address; City; State; Zip Code Plano, TX 75024	AC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ns)		
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	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 43/53 Rpt: 46/59	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$20.20
_	Deinainal assu	San Antonio, TX 78255	O Frankrian (Con Instruction	<u>-</u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (I Sitterle O.D., Scott Contributor address; City; State; Zip Code	D#:		Amount of Contribution (\$)	\$100.00
	Dringing aggr	San Antonio, TX 78247	Employer (Coo Instruction	<u></u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (I Smith O.D., Cameron Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$100.00
		Mansfield, TX 76063				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (I Sorrenson O.D., Laurie Contributor address; City; State; Zip Code Cedar Park, TX 78613	D#:)		Amount of Contribution (\$)	\$500.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (I Soto O.D., Nichole Contributor address; City; State; Zip Code Rockport, TX 78382	D#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
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	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDUL	E A1
	The Instruc	etion Guide explains how to complete th	nis form.		Total pages Schedule A1: Sch: 44/53 Rpt: 47/59	
2	FILER NAME Texas Opton	netric PAC			Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$200.00
_		Dallas, TX 75252	10.5 1 10 1 1 11	<u> </u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 09/15/2025	Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$20.20
	Principal occu	Big Spring, TX 79720 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Optometrist			,		
	Date 09/15/2025	Full name of contributor out-of-state PAC Strong O.D., Jane Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$100.00
		Cypress, TX 77419				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC Sturm O.D., Mark Contributor address; City; State; Zip Code Austin, TX 78749	(ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC Sullivan O.D., Mitchell Contributor address; City; State; Zip Code Carrollton, TX 75006	(ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 45/53 Rpt: 48/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$5.00
8	Dringinal accu	Dallas, TX 75243 pation / Job title (See Instructions)	9 Employer (See Instructions	<u>''</u>		
0	Optometrist	oalion / Job title (See Instructions)	employer (See instructions	o)		
	Date 09/15/2025	Full name of contributor	:)	•	Amount of Contribution (\$)	\$100.00
		Amarillo, TX 79110				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID# Terrell O.D., Jenny Contributor address; City; State; Zip Code	:		Amount of Contribution (\$)	\$50.00
		Hurst, TX 76054				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID# Terwilliger O.D., Josey Contributor address; City; State; Zip Code Houston, TX 77004	t:)		Amount of Contribution (\$)	\$5.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID# Thames O.D., Lacey Contributor address; City; State; Zip Code Hutto, TX 78634		•	Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	5)		
			-			

	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: 46/53 Rpt: 49/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
_	Delicalization	Amarillo, TX 79109	O Family on (October to attraction	$\overline{\Gamma}$		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#: Thomas O.D., Jeff Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	D: : 1	Melissa, TX 75454		<u></u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Thompson O.D., Melanie Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Amarillo, TX 79109				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Thornton O.D., Kristofer Contributor address; City; State; Zip Code Longview, TX 75605)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (ID#:_ Tovias O.D., Mayra Contributor address; City; State; Zip Code Santa Fe, TX 77510			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete t	his form.	1	Total pages Schedule A1: Sch: 47/53 Rpt: 50/59	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
_	Delicalization	Dallas, TX 75206	D. Faralana (Cara Instruction			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 09/15/2025	Full name of contributor out-of-state PAC Tran O.D., Jessica Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$20.20
	Dringinal occu	Austin, TX 78759	Employer (See Instructions	z) 		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state PAC Tran O.D., Joshua Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$5.20
		Richmond, TX 77407				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC Tran O.D., Lori Contributor address; City; State; Zip Code Plano, TX 75024	C (ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/15/2025	Full name of contributor out-of-state PAC Tran O.D., Toan Contributor address; City; State; Zip Code Carrollton, TX 75010	C (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			'			

	MONET	ARY POLITICAL CONTRIB	BUTIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete	e this form.	1	otal pages Schedule A1: Sch: 48/53 Rpt: 51/59	
2	FILER NAME Texas Opton	netric PAC			iler ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor	PAC (ID#:)	7 A	Amount of Contribution (\$)	\$20.20
_		Texarkana, TX 75503				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	ıs)		
	Date 09/15/2025	Trinh O.D., Kim	PAC (ID#:)		amount of Contribution (\$)	\$50.00
	Principal occu	Austin, TX 78728 pation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Optometrist		, ., · · · · · · · · · · · · · · · · · ·	-,		
	Date 09/15/2025	Full name of contributor out-of-state F Tupa O.D., Faye Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Ganado, TX 77962				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 09/15/2025	Full name of contributor out-of-state F Turner O.D., Kimberly Contributor address; City; State; Zip Code San Antonio, TX 78258	PAC (ID#:)		amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 09/15/2025	Full name of contributor out-of-state F Twa O.D., Michael Contributor address; City; State; Zip Code Houston, TX 77019	PAC (ID#:)		nmount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ns)		
			•			

	MONET	ARY POLITICAL CONTRIE	BUTION	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to comple	te this for	m.	1	Total pages Schedule A1: Sch: 49/53 Rpt: 52/59	
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$400.00
_	<u> </u>	Austin, TX 78749	10				
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	;)		
	Date 09/15/2025	Tybor O.D., John	PAC (ID#:			Amount of Contribution (\$)	\$20.20
	Delicalization	Austin, TX 78746		Formula van (O. a. la atau atian a	_		
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/15/2025	Full name of contributor out-of-state Upchurch O.D., Alan Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$50.00
		McKinney, TX 75070					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/15/2025	Urizar O.D., Jocelyn	PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 09/15/2025	Full name of contributor out-of-state Vasquez O.D., Celina Contributor address; City; State; Zip Code Palmview, TX 78572				Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	i)		
			<u>, </u>				

	MONET	ARY POLITICAL CONTRIBUT	rions			SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	is form.		1	Total pages Schedule A1: Sch: 50/53 Rpt: 53/59	
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$50.00
_	Delicalization	Lubbock, TX 79416	la F	and a second Construction of			
8	Optometrist	pation / Job title (See Instructions)	9 Er	nployer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (Vorster O.D., Edward Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$400.00
		Silsbee, TX 77656					
	Principal occu Optometrist	pation / Job title (See Instructions)	Er	nployer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (Wagner O.D., Troy Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$200.00
		The Woodlands, TX 77382					
	Principal occu Optometrist	oation / Job title (See Instructions)	Er	nployer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (Walters O.D., Mary Kate Contributor address; City; State; Zip Code Fort Worth, TX 76008)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Er	nployer (See Instructions)		
	Date 09/15/2025	Full name of contributor out-of-state PAC (Warstler O.D., Ashley Contributor address; City; State; Zip Code Houston, TX 77042	D#:			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Er	nployer (See Instructions)		
			1				

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to co	omplete this form	n.	1	Total pages Schedule A1: Sch: 51/53 Rpt: 54/59	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	Way O.D., David	-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$200.00
8	Drincinal occu	Spring, TX 77379 pation / Job title (See Instructions)	la la	Employer (See Instructions			
0	Optometrist	oation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 09/15/2025	West O.D., Jacob Contributor address; City; State; Zip	-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	Flint, TX 75762 pation / Job title (See Instructions)		Employer (See Instructions)		
	Optometrist	,					
	Date 09/15/2025	Full name of contributor out Wild O.D., Tristan Contributor address; City; State; Zip	-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
		Austin, TX 78730					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/15/2025	Full name of contributor out Wilken O.D., Bret Contributor address; City; State; Zip Coppell, TX 75019	-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date 09/15/2025	Williams O.D., Bryan	-of-state PAC (ID#:			Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
			,				

	MONET	ARY POLITICAL CONT	RIBUTIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to com	plete this form.	1	Total pages Schedule A1: Sch: 52/53 Rpt: 55/59	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 09/15/2025	 Full name of contributor out-of-Williams O.D., James Contributor address; City; State; Zip C 		7	Amount of Contribution (\$)	\$50.00
		Joplin, MO 64804				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See I	nstructions)		
	Date 09/15/2025	Wilson O.D., Kent Contributor address; City; State; Zip C	state PAC (ID#:		Amount of Contribution (\$)	\$100.00
	Principal occu	Terrell, TX 75160 pation / Job title (See Instructions)	Employer (See I	nstructions)		
	Optometrist					
	Date 09/15/2025	Full name of contributor out-of- Wong O.D., Veronica Contributor address; City; State; Zip C	state PAC (ID#:		Amount of Contribution (\$)	\$50.00
		Kingwood, TX 77339				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See I	nstructions)		
	Date 09/15/2025	Wright O.D., David	state PAC (ID#:		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See I	nstructions)		
	Date 09/15/2025	Wright O.D., Lance	state PAC (ID#:		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See I	nstructions)		
			•			

09/15/2025 Yee O.D., Jamie 6 Contributor address; City; State; Zip Code Dallas, TX 75033	ILE A1	SCHEDUL	NS	CONTRIBUTIO	ARY POLITICAL (MONET	
Texas Optometric PAC 4 Date			m.	w to complete this fo	ction Guide explains hov	The Instru	
4 Date 09/15/2025 5 Full name of contributor	ion Filers)				2		
Principal occupation / Job title (See Instructions) Optometrist Date O9/15/2025 Principal occupation / Job title (See Instructions) Pate O9/15/2025 Principal occupation / Job title (See Instructions) Principal occupation / Job title (See Instructions)	\$100.00)	_	5 Full name of contributor Yee O.D., Jamie	Date	4
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) O9/15/2025 Yeh O.D., Shihwei Contributor address; City; State; Zip Code Frisco, TX 75035 Principal occupation / Job title (See Instructions) Employer (See Instructions)							
O9/15/2025 Yeh O.D., Shihwei Contributor address; City; State; Zip Code Frisco, TX 75035 Principal occupation / Job title (See Instructions) Employer (See Instructions)			Employer (See Instructions)	ns)			8
Principal occupation / Job title (See Instructions) Employer (See Instructions)	\$50.00	Amount of Contribution (\$)		<u> </u>	Yeh O.D., Shihwei		
C promotion			Employer (See Instructions)	ns)	upation / Job title (See Instructions		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee 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
OTHER (enter a category not listed above)

Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment	3y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District Cal Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 1/1 Rpt: 57/59	Texas Optometric PAC 00015622	
4 Date	5 Payee name	
09/15/2025	Greg Abbott Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$25,000.00	PO Box 308	
Expenditure from		
corporate funds	Austin, TX 78767	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Campaign Contributions	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/C	DH .	

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE |

	The Instruction Guide explains how to	complete this form.
Total pages Schedule I: Sch: 1/2 Rpt:	2 FILER NAME Texas Optometric PAC	3 Filer ID (Ethics Commission Filers) 00015622
Date 09/02/2025	5 Payee name Authorize.net	·
Amount (\$) 64.67 Expenditure from corporate funds	7 Payee Address; City; State; Zip 808 E Utah Valley Dr American Fork, UT 84003	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Accounting Services & Bank Fees
Date	Payee name	
09/15/2025	Carriage House Partners	
Amount (\$) 6,250.00 Expenditure from corporate funds	Payee Address; City; State; Zip 5502 Hidden Trails Arlington, TX 76017	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required. Lobbyist
Date	Payee name	
09/16/2025	Clem, Mike	
Amount (\$) 1,000.95 Expenditure from	Payee Address; City; State; Zip 10155 Shadyview	
corporate funds	Dallas, TX 75238	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Accounting Services & Bank Fees
Date	Payee name	
09/25/2025	Paypal	
Amount (\$) 435.90	Payee Address; City; State; Zip 2211 North First Street	
Expenditure from corporate funds	San Jose, CA 95131	
PURPOSE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Payment fee

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE |

	The Instruction Guide explains how to complete this form.				
Total pages Schedule I: Sch: 2/2 Rpt:	2 FILER NAME Texas Optometric PAC 3 Filer ID (Ethics Commission Filers) 00015622				
4 Date 09/25/2025	5 Payee name QuickBooks Payments				
6 Amount (\$) 598.48 Expenditure from corporate funds	7 Payee Address; City; State; Zip 2632 Marine Way Mountain View, CA 94043				
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking (b) Description (See instructions regarding type of information required.) Accounting Services & Bank Fees				
Date	Payee name				
09/15/2025	TOA Facility				
Amount (\$)	Payee Address; City; State; Zip				
1,902.50	3011 N Lamar ste 300				
Expenditure from corporate funds	Austin, TX 78705				
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description (See instructions regarding type of information required.) Accounting Services & Bank Fees				