

MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC
COVER SHEET PG 1

The MPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00069305		2 Total pages filed: 68	
3 COMMITTEE NAME Texas Association of Nurse Anesthetists Political Action Committee				OFFICE USE ONLY Date Received ELECTRONICALLY FILED 11/05/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 919 Congress Ave., Suite 720 Austin, TX 78701				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Wendy NICKNAME LAST SUFFIX Odell				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3305 Steck Ave. Ste. 200 Austin , TX 78757				
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3305 Steck Ave. Ste. 200 Austin , TX 78757				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (903) 335-0642				
9 REPORT TYPE	☒ Monthly ☐ 10th day after campaign treasurer termination ☐ Dissolution (Attach PAC-DR)				
10 MONTHLY REPORT FILING DEADLINE	☐ January 5 ☐ April 5 ☐ July 5 ☐ October 5 ☐ February 5 ☐ May 5 ☐ August 5 ☒ November 5 ☐ March 5 ☐ June 5 ☐ September 5 ☐ December 5				
11 PERIOD COVERED	Month Day Year THROUGH Month Day Year 09/26/2025 10/25/2025				

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME Texas Association of Nurse Anesthetists Political Action Committee	13 Filer ID (Ethics Commission Filers) 00069305
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	
		B. Opposed	
	2. 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.)	Rep. Caroline Fairly State Representative	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) ☐ check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 21,666.78
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,574.42
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 295,470.21
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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

Mrs. Wendy Odell

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**
ADDENDUM

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12 COMMITTEE NAME Texas Association of Nurse Anesthetists Political Action Committee		13 Filer ID (Ethics Commission Filers) 00069305	
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	
		B. Opposed	
	2. 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.)	Rep. Drew Darby State Representative	

SUBTOTALS - MPAC**FORM MPAC**
COVER SHEET PG 3
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17 COMMITTEE NAME Texas Association of Nurse Anesthetists Political Action Committee		18 Filer ID (Ethics Commission Filers) 00069305
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 20,354.84
2.	☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	☐ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	☐ SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	☐ SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	☒ SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$ 511.94
7.	☒ SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$ 800.00
8.	☐ SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	☐ SCHEDULE E: LOANS	\$
10.	☒ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 2,574.42
11.	☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	☐ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	☒ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.02

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/60 Rpt: 5/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/03/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) ANTHONY, VO 6 Contributor address; City; State; Zip Code AUSTIN, TX 75024	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Aaron, Krenek Contributor address; City; State; Zip Code Bay City, TX 78212	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/14/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Abigail L., Caswell Contributor address; City; State; Zip Code Friendswood, TX 77379	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Adam, Newman Contributor address; City; State; Zip Code Dallas, TX 76301	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/24/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Aiya, Wommack Contributor address; City; State; Zip Code Naples, TX 77045	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/60 Rpt: 6/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/24/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Alexis, Whiteley 6 Contributor address; City; State; Zip Code Victoria, TX 79118	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 09/28/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Alison, Elliott Contributor address; City; State; Zip Code Bullard, TX 78414	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/01/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Allison Laine Michalek, Spears Contributor address; City; State; Zip Code Houston, TX 76306	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SRNA		Employer (See Instructions)
Date 10/15/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Alyssa, Dawson Contributor address; City; State; Zip Code McAllen, TX 78257	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/26/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Alyssa, Pugh Contributor address; City; State; Zip Code Cresson, TX 75771	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/60 Rpt: 7/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/05/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Amanda, McKinney 6 Contributor address; City; State; Zip Code Cypress, TX 77584	7 Amount of Contribution (\$) \$0.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/09/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Amanda, Nelson Contributor address; City; State; Zip Code Fort Worth, TX 76001	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Amber, High Contributor address; City; State; Zip Code Dickinson, TX 76008	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/15/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Amy, Sheppard Contributor address; City; State; Zip Code Fort Worth, TX 77356	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/15/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Andre, Miller Contributor address; City; State; Zip Code League City, TX 79521	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/60 Rpt: 8/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/26/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Andrea, Etheridge 6 Contributor address; City; State; Zip Code College Station, TX 43551	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Andrea, Gutierrez Contributor address; City; State; Zip Code Poolville, TX 78610	Amount of Contribution (\$) \$0.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/05/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Andrea, malcolm Contributor address; City; State; Zip Code Devine, TX 76111	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Crna		Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Andrew, McPhail Contributor address; City; State; Zip Code Plano, TX 77346	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) Nurse Anesthetist		Employer (See Instructions)
Date 10/16/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Andrew & Jen, Gomez Contributor address; City; State; Zip Code Pearland, TX 75167	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNAs		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/60 Rpt: 9/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/03/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Angelica, Mata 6 Contributor address; City; State; Zip Code McAllen, TX 77054	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 09/26/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Arianne, Co Contributor address; City; State; Zip Code Fort Worth, TX 78633	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/14/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Arianne, Pichon Contributor address; City; State; Zip Code Buda, TX 75287	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Ashley, Cook Contributor address; City; State; Zip Code Frisco, TX 76005	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/07/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Ashley, Wilson Contributor address; City; State; Zip Code Corpus Christi, TX 75063	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/60 Rpt: 10/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/07/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) BRIAN T, GEGEL 6 Contributor address; City; State; Zip Code San Antonio, TX 77008	7 Amount of Contribution (\$) \$41.67
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/03/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Bailey, Freeman Contributor address; City; State; Zip Code Fort Worth, TX 78736	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Beth, Heathington Contributor address; City; State; Zip Code Georgetown, TX 77389	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/24/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Bhavika, Patel Contributor address; City; State; Zip Code SugarLand, TX 77478	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/10/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Bibin, Abraham Contributor address; City; State; Zip Code Irving, TX 78750	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/60 Rpt: 11/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/13/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Brandon, Lemen 6 Contributor address; City; State; Zip Code Conroe, TX 76112	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Brandon, Minton Contributor address; City; State; Zip Code Poolville, TX 77057	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Breno, Teixeira Contributor address; City; State; Zip Code McAllen, TX 75093	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) Nurse Anesthetist		Employer (See Instructions)
Date 10/14/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Brett A, Gallagher Contributor address; City; State; Zip Code Lubbock, TX 76109	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/04/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Brian, Albright Contributor address; City; State; Zip Code EL PASO, TX 77401	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/60 Rpt: 12/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/22/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Brian, Cornelius 6 Contributor address; City; State; Zip Code Burleson, TX 78681	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) Mermaid		9 Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Brian, Walford Contributor address; City; State; Zip Code Victoria, TX 77098	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/09/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Brian B. Walker DNAP,, CRNA Contributor address; City; State; Zip Code Harlingen, TX 76502	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) Certified Registered Nurse Anesthetist		Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Brian T, Gegel Contributor address; City; State; Zip Code San Antonio, TX 75167	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/29/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Brittaney, Ross Contributor address; City; State; Zip Code Dallas, TX 77836	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/60 Rpt: 13/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/17/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Brynn, Steward 6 Contributor address; City; State; Zip Code Rockwall, TX 76087	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Carolyn & Neil, Altuna Contributor address; City; State; Zip Code Austin, TX 76051	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Carolyn M, Ryschon Contributor address; City; State; Zip Code Weatherford, TX 77057	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/15/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Cat, Hack Contributor address; City; State; Zip Code Dallas, TX 78258	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Catherine, Smith Contributor address; City; State; Zip Code Manvel, TX 77578	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/60 Rpt: 14/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/12/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Cathy, Reidy 6 Contributor address; City; State; Zip Code Granbury, TX 77019	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Chelsie, Hudson Contributor address; City; State; Zip Code Missouri City, TX 77396	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Cherese, Wheelock Contributor address; City; State; Zip Code Cedar Park, TX 78015	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Christian, Terrazas Contributor address; City; State; Zip Code Richmond, TX 77539	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/16/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Christine, Hart Contributor address; City; State; Zip Code Plano, TX 76031	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/60 Rpt: 15/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/02/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Christine, Hart 6 Contributor address; City; State; Zip Code Plano, TX 76008	7 Amount of Contribution (\$) \$62.50
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Christine, Mogire Contributor address; City; State; Zip Code San Antonio, TX 77040	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/05/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Christine Burnett,, DNP-CRNA Contributor address; City; State; Zip Code Friendswood, TX 77009	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/14/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Christopher Derrick, Stroh Contributor address; City; State; Zip Code Austin, TX 77573	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/01/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Christy, Richardson Contributor address; City; State; Zip Code Amarillo, TX 78520	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/60 Rpt: 16/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/26/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Christy, Schmidt 6 Contributor address; City; State; Zip Code Conroe, TX 77494	7 Amount of Contribution (\$) \$41.67
8 Principal occupation / Job title (See Instructions) Crna		9 Employer (See Instructions)
Date 10/03/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Cindy, Papizan Contributor address; City; State; Zip Code Saint Hedwig, TX 78626	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/02/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Clayton, Clark Contributor address; City; State; Zip Code Wichita Falls, TX 78539	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Colton, Gloff Contributor address; City; State; Zip Code Clifton, TX 78633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/24/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Cora, Rabe Contributor address; City; State; Zip Code Humble, TX 75087	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/60 Rpt: 17/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/03/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Courtney, Devlin 6 Contributor address; City; State; Zip Code Bedford, TX 79119	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Cristina, Garza Contributor address; City; State; Zip Code Mansfield, TX 77904	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/14/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Crystal, Tucker Contributor address; City; State; Zip Code Hallsville, TX 76110	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/04/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Damilola, Balogun Contributor address; City; State; Zip Code Houston, TX 76087	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Dana, Magruder Contributor address; City; State; Zip Code Austin, TX 77578	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/60 Rpt: 18/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/30/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Dana, Ramsey 6 Contributor address; City; State; Zip Code Austin, TX 75032	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA (Nurse Anesthetist)		9 Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Dania, Northcutt Contributor address; City; State; Zip Code Houston, TX 77904	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/18/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Danielle, Wilderman Contributor address; City; State; Zip Code Waxahachie, TX 77479	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA, FNP-C		Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Danielle, Wilderman Contributor address; City; State; Zip Code Waxahachie, TX 77904	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Danny, Hammonds Contributor address; City; State; Zip Code Midlothian, TX 76065	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) Nurse anesthesiologist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/60 Rpt: 19/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/30/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) David, Olson 6 Contributor address; City; State; Zip Code Ft worth, TX 79108	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 09/26/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) David, Sierra Contributor address; City; State; Zip Code Round Rock, TX 76110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) DeaAnn, Martin Contributor address; City; State; Zip Code Parker, TX 76028	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) Crna		Employer (See Instructions)
Date 10/19/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) DeaAnn, Martin Contributor address; City; State; Zip Code Amarillo, TX 79119	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/28/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Debra, Krenek Contributor address; City; State; Zip Code Edinburg, TX 76133	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/60 Rpt: 20/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/26/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Diana P, Wilson 6 Contributor address; City; State; Zip Code Cedar Creek, TX 77025	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 09/28/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Douglas, Massey Contributor address; City; State; Zip Code San Antonio, TX 78539	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/07/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Dr. GARRETT, DUPREE Contributor address; City; State; Zip Code Fort Worth, TX 75206	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Nurse Anesthesiologist		Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Dr. Scott, Shaffer Contributor address; City; State; Zip Code Salida, CO 75229	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) Professor Texas Wesleyan University GPNA		Employer (See Instructions)
Date 10/23/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Editha, Flemming Contributor address; City; State; Zip Code Manvel, TX 78023	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) Nurse Anesthetist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/60 Rpt: 21/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/09/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Eduardo, Cedeno 6 Contributor address; City; State; Zip Code San Antonio, TX 79423	7 Amount of Contribution (\$) \$0.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Eduardo, regalado Contributor address; City; State; Zip Code Edinburg, TX 77346	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) Crna		Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Efrain, Torres Contributor address; City; State; Zip Code Argyle, TX 78596	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Elaynne, Reyes Contributor address; City; State; Zip Code Arlington, TX 77008-2314	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/02/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Elida Santana, Ruiz Contributor address; City; State; Zip Code San Antonio, TX 76450	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/60 Rpt: 22/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/18/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Emily, Washington 6 Contributor address; City; State; Zip Code Boerne, TX 75904-6304	7 Amount of Contribution (\$) \$62.50
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Emily, Winter Contributor address; City; State; Zip Code League City, TX 78586	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/26/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Erica, Bazan Contributor address; City; State; Zip Code Katy, TX 78664	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Erica, McGuire Contributor address; City; State; Zip Code Haskell, TX 76179	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Erica, Williams Contributor address; City; State; Zip Code Fort Worth, TX 76126-4451	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/60 Rpt: 23/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/20/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Ericka, Whittaker 6 Contributor address; City; State; Zip Code Midland, TX 75033	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) SRNA		9 Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Erin, McLaughlin Contributor address; City; State; Zip Code Frisco, TX 77578	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/12/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Evan, Mayes Contributor address; City; State; Zip Code Dallas, TX 77563	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/27/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Evangeline, Tomongha Contributor address; City; State; Zip Code Katy, TX 75206	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/25/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Felicia, Cooks Contributor address; City; State; Zip Code San Antonio, TX 77845	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/60 Rpt: 24/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/24/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Forrest, Baker 6 Contributor address; City; State; Zip Code Argyle, TX 78731	7 Amount of Contribution (\$) \$41.67
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/25/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Frances E, Bradley Contributor address; City; State; Zip Code El Paso, TX 79924	Amount of Contribution (\$) \$89.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Gail, Chmiel Contributor address; City; State; Zip Code North Richland Hills, TX 79606	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/09/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Garrett, Dupree Contributor address; City; State; Zip Code Fort Worth, TX 77080	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Gerald, Reed Contributor address; City; State; Zip Code Corinth, TX 76226	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/60 Rpt: 25/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/23/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Graciela, Martinez 6 Contributor address; City; State; Zip Code Harlingen, TX 77627	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 09/26/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Grant Van, Meter Contributor address; City; State; Zip Code Warren, TX 77584	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/27/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Greg, Collins Contributor address; City; State; Zip Code Granbury, TX 77450	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/24/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Hai Tuan, Vu Contributor address; City; State; Zip Code Beaumont, TX 78043	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) Certified Registered Nurse Anesthetist		Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Haley, DeLaGarza Contributor address; City; State; Zip Code Houston, TX 78251-2359	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/60 Rpt: 26/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/22/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Haley, Jordan 6 Contributor address; City; State; Zip Code Belton, TX 75002	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Crna		9 Employer (See Instructions) DLM Anesthesia PLLC
Date 10/04/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Haley, Yarbrough Contributor address; City; State; Zip Code Port Lavaca, TX 78414	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Halie, Elam Contributor address; City; State; Zip Code Amarillo, TX 75082	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Harold, Bishop Contributor address; City; State; Zip Code Lufkin, TX 77406	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) Nurse Anesthetist		Employer (See Instructions)
Date 10/14/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Heather M, Smith Contributor address; City; State; Zip Code San Benito, TX 75214	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/60 Rpt: 27/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/24/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Hillary, Burkhardt 6 Contributor address; City; State; Zip Code Nederland, TX 77904	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/24/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Holly, Hardy Contributor address; City; State; Zip Code Fort Worth, TX 77025	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/13/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Holly, Pham Contributor address; City; State; Zip Code Temple, TX 77019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Chief CRNA		Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Hylda, Nugent Contributor address; City; State; Zip Code Weatherford, TX 76063	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA, Independent Contractor		Employer (See Instructions)
Date 10/01/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Israel, Coronado Contributor address; City; State; Zip Code Weslaco, TX 78114	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/60 Rpt: 28/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/21/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Jacob, Rao 6 Contributor address; City; State; Zip Code Dallas, TX 78504	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jade, Franklin Contributor address; City; State; Zip Code Aledo, TX 30324	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) James ?Duncan?, Martin Contributor address; City; State; Zip Code College Station, TX 76210	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) James R., Walker Contributor address; City; State; Zip Code Pearland, TX 75093	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jane, Laidlaw Contributor address; City; State; Zip Code Dallas, TX 75789	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/60 Rpt: 29/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/21/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Janet, Sumodobila 6 Contributor address; City; State; Zip Code The Woodlands, TX 76248	7 Amount of Contribution (\$) \$85.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Janet, Sumodobila Contributor address; City; State; Zip Code The Woodlands, TX 77550	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/26/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jared, Martinez Contributor address; City; State; Zip Code Beaumont, TX 77385	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/15/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jay, Tydlaska Contributor address; City; State; Zip Code Fort Worth, TX 77381	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/15/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jeaniece, Mukherjee Contributor address; City; State; Zip Code Wichita Falls, TX 81201	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions) Texas Wesleyan University GPNA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/60 Rpt: 30/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/24/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Jeff, Green 6 Contributor address; City; State; Zip Code Amarillo, TX 77062-2253	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/03/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jeff, Hutson Contributor address; City; State; Zip Code Graham, TX 77004	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Crna		Employer (See Instructions)
Date 09/27/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jeffrey D, Johnson Contributor address; City; State; Zip Code Abilene, TX 79938	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/18/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jenni, Andersen Contributor address; City; State; Zip Code Midland, TX 66028	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/18/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jennifer, Andersen Contributor address; City; State; Zip Code Midland, TX 76008	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/60 Rpt: 31/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/30/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Jennifer, Anthony 6 Contributor address; City; State; Zip Code Texarkana, TX 78717	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jennifer, Leuellen Contributor address; City; State; Zip Code Manvel, TX 04101	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/03/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jennifer, Norwood Contributor address; City; State; Zip Code Atlanta, GA 76017	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) Certified Registered Nurse Anesthetist		Employer (See Instructions)
Date 10/18/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jennifer, Rios Contributor address; City; State; Zip Code Manvel, TX 76602	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jennifer, Shahan Contributor address; City; State; Zip Code Colleyville, TX 76248	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/60 Rpt: 32/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/08/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Jennifer, Shahan 6 Contributor address; City; State; Zip Code Colleyville, TX 78504	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 09/27/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jessica, Appel Contributor address; City; State; Zip Code Fort Worth, TX 76513	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/24/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jessica, Custance Contributor address; City; State; Zip Code Aledo, TX 76008	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jessica, Green Contributor address; City; State; Zip Code BULLARD, TX 78504	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/27/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jessica, Michinock Contributor address; City; State; Zip Code Round Rock, TX 78260	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/60 Rpt: 33/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/05/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Jessica, Ulinski 6 Contributor address; City; State; Zip Code Georgetown, TX 78552	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jessica, Zacek Contributor address; City; State; Zip Code Houston, TX 77979	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/24/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jesus Andrew, Bagos Contributor address; City; State; Zip Code Houston, TX 76109	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/18/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Jo, Whaley Contributor address; City; State; Zip Code Fort Worth, TX 76028	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/23/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) John, Pare Contributor address; City; State; Zip Code Temple, TX 76092	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/60 Rpt: 34/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/27/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Jose, Corpus 6 Contributor address; City; State; Zip Code Perrysburg, OH 77056	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/05/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Joseph, Mueller Contributor address; City; State; Zip Code Austin, TX 76179	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/01/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Joseph, Rodriguez Contributor address; City; State; Zip Code Phoenix, TX 78152	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Nurse Anesthesiologist		Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Josh Stevenson,, CRNA Contributor address; City; State; Zip Code Perryton, TX 75235	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/04/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Joshua, Smart Contributor address; City; State; Zip Code Houston, TX 76024	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/60 Rpt: 35/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/30/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Juan, Rodriguez 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78254-1841	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Julia, Dishon Contributor address; City; State; Zip Code Beaumont, TX 77578	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/24/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Julia, Grove Contributor address; City; State; Zip Code Austin, TX 77396-3888	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/02/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Julie, Ji Contributor address; City; State; Zip Code Bellaire, TX 77979	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Karrie, Rutherford Contributor address; City; State; Zip Code Caldwell, TX 77578	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/60 Rpt: 36/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/26/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Kathryn J. K., Kinne 6 Contributor address; City; State; Zip Code Keller, TX 77406	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) Certified Registered Nurse Anesthetist		9 Employer (See Instructions)
Date 10/24/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Katie, Hickman Contributor address; City; State; Zip Code Arlington, TX 76226	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/26/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Kay, Sanders Contributor address; City; State; Zip Code Fort Worth, TX 79602	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Kaylan, Vollmering Contributor address; City; State; Zip Code Victoria, TX 78045	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/19/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Kella, Townson Contributor address; City; State; Zip Code Cedar Hill, TX 78633	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/60 Rpt: 37/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/27/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Kelly, Curbow 6 Contributor address; City; State; Zip Code Hideaway, TX 75501	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Kelsey, Albrecht Contributor address; City; State; Zip Code Houston, TX 75650	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/16/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Kelsey, Williams Contributor address; City; State; Zip Code DALLAS, TX 76108	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/25/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Kenny, Corder Contributor address; City; State; Zip Code Abilene, TX 76633	Amount of Contribution (\$) \$117.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Kenny, Corder Contributor address; City; State; Zip Code Abilene, TX 76633	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/60 Rpt: 38/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/17/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Khadijah, Udu 6 Contributor address; City; State; Zip Code Houston, TX 75104	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Kim, Morris Contributor address; City; State; Zip Code Crowley, TX 76064	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Korde, Smith Contributor address; City; State; Zip Code Troup, TX 77024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Kristen, Booth Contributor address; City; State; Zip Code Houston, TX 76182	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/03/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Kyle, Harper Contributor address; City; State; Zip Code Aledo, TX 77006	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/60 Rpt: 39/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/30/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Kyle, Pendleton 6 Contributor address; City; State; Zip Code Lufkin, TX 76087-3820	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/14/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Lara, Rhodes Contributor address; City; State; Zip Code Orange Park, FL 77707	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Lauren, Lemen Contributor address; City; State; Zip Code Conroe, TX 75002	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/03/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Leann, Northcutt Contributor address; City; State; Zip Code Austin, TX 78016	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/28/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Lee, Mabry Contributor address; City; State; Zip Code Katy, TX 78723	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/60 Rpt: 40/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/26/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Lillian, Guadamuz 6 Contributor address; City; State; Zip Code Boerne, TX 79311	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 09/27/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Lillian, Moya Contributor address; City; State; Zip Code Houston, TX 77045	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Lillian, Resnick Contributor address; City; State; Zip Code Austin, TX 79705	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Crna		Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Lisa, Blacketter Contributor address; City; State; Zip Code Port Lavaca, TX 79015	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/25/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Lisa, Carter Contributor address; City; State; Zip Code College Station, TX 79606	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) Nurse anesthetist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/60 Rpt: 41/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/24/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Lisa Farry, Jennings 6 Contributor address; City; State; Zip Code Laredo, TX 75568	7 Amount of Contribution (\$) \$41.67
8 Principal occupation / Job title (See Instructions) Crna		9 Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Lori, Vetitoe Contributor address; City; State; Zip Code Spring, TX 77401	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/27/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Lorin, Salazar Contributor address; City; State; Zip Code Conroe, TX 75757	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/03/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Louis Vincent, Barton Contributor address; City; State; Zip Code Brownsville, TX 77399	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/15/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Louise, Scudieri Contributor address; City; State; Zip Code Decatur, TX 77459	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/60 Rpt: 42/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/25/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Lynn, Andrews 6 Contributor address; City; State; Zip Code Flower Mound, TX 76571	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/02/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Maddie, Renouard Contributor address; City; State; Zip Code Grapevine, TX 77096	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Malaniy, Ilya Contributor address; City; State; Zip Code Plano, TX 76036	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/02/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Mandy, Moore Contributor address; City; State; Zip Code Richardson, TX 76022	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/16/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Mandy, Spitzer Contributor address; City; State; Zip Code Fort Worth, TX 77578	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/60 Rpt: 43/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/27/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Maria, Moya 6 Contributor address; City; State; Zip Code Katy, TX 77459	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 09/28/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Maria Angelina, Supan Contributor address; City; State; Zip Code Houston, TX 76008	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/28/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Maria Romina, Flores Contributor address; City; State; Zip Code Houston, TX 76487-5719	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/27/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Maria Romina, Flores Contributor address; City; State; Zip Code Houston, TX 77968	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Mark, Barr Contributor address; City; State; Zip Code Houston, TX 78559	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/60 Rpt: 44/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/06/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Mark, Bergeron 6 Contributor address; City; State; Zip Code Houston, TX 77573	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Mark, Culp Contributor address; City; State; Zip Code Weatherford, TX 76008	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) Nurse Anesthetist		Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Mark, Doria Contributor address; City; State; Zip Code Katy, TX 78628	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/12/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Mark, Talon Contributor address; City; State; Zip Code Bayou Vista, TX 76234	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/24/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Marsha, Bujnoch Contributor address; City; State; Zip Code Houston, TX 77584	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/60 Rpt: 45/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/07/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Martha, Vera 6 Contributor address; City; State; Zip Code Pearland, TX 78757	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Mary Alice & Jaimason, McReynolds Contributor address; City; State; Zip Code Aledo, TX 99623	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Mary C DuBose, CRNA Contributor address; City; State; Zip Code Lufkin, TX 77414	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/26/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Masson, Farmer Contributor address; City; State; Zip Code Kemp, TX 77845	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) Certified Registered Nurse Anesthetist		Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Matthew, Manley Contributor address; City; State; Zip Code Canyon, TX 75209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/60 Rpt: 46/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/30/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Max, Campos 6 Contributor address; City; State; Zip Code Mansfield, TX 79106	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/11/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Megan, Sheneman Contributor address; City; State; Zip Code Houston, TX 76308	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Melanie, Black Contributor address; City; State; Zip Code Round Rock, TX 77459	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/27/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Melissa, Dominick Contributor address; City; State; Zip Code Spring, TX 78747	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/27/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Melizza, Saenz Contributor address; City; State; Zip Code Belton, TX 79423	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) Nurse Anesthesia		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/60 Rpt: 47/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/21/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Meredith, Paloian 6 Contributor address; City; State; Zip Code Katy, TX 77494	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/16/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Meredith, Tabladillo Contributor address; City; State; Zip Code League City, TX 78735	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Micah, Walden Contributor address; City; State; Zip Code Sulphur Springs, TX 76034	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/15/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Michael, Byars Contributor address; City; State; Zip Code HOUSTON, TX 78628	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Michael, Cooney Contributor address; City; State; Zip Code Keller, TX 75238	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/60 Rpt: 48/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/03/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Michael, Dinos 6 Contributor address; City; State; Zip Code Pharr, TX 79911	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 09/27/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Michael, Nick Contributor address; City; State; Zip Code Abernathy, TX 75206	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Michael, Ombongi Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/28/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Mikael, McDowell Contributor address; City; State; Zip Code Corpus Christi, TX 77379	Amount of Contribution (\$) \$0.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Miriam, Talley Contributor address; City; State; Zip Code San Antonio, TX 76116	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/60 Rpt: 49/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/24/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Mishawna, Bohner 6 Contributor address; City; State; Zip Code Rockwall, TX 77706-6730	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/09/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Misty, Rebman Contributor address; City; State; Zip Code Keller, TX 77384	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/19/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Nancy, Udall Contributor address; City; State; Zip Code Weatherford, TX 77379	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/26/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Nancy K., Washington Contributor address; City; State; Zip Code Houston, TX 76513	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/03/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Naomie, Moe Contributor address; City; State; Zip Code Floresville, TX 76126	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/60 Rpt: 50/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/16/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Natalie, Lawrence 6 Contributor address; City; State; Zip Code Spring, TX 76634	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/18/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Nataly, Garcia Contributor address; City; State; Zip Code Pasadena, TX 75035	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Nathan, Jones Contributor address; City; State; Zip Code Manvel, TX 78730	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Nurse Anesthetist		Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Nicholas, Sorrell Contributor address; City; State; Zip Code Montgomery, TX 76092	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Nizy, Samuel Contributor address; City; State; Zip Code Missouri City, TX 75483	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/60 Rpt: 51/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/30/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Nora, Coast 6 Contributor address; City; State; Zip Code Mcallen, TX 78228	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 09/28/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Peter, Okello Contributor address; City; State; Zip Code Lubbock, TX 77019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Nurse Anesthesiologist		Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Peter, Omoni Contributor address; City; State; Zip Code Katy, TX 75915	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/26/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Preston, Broadhead Contributor address; City; State; Zip Code Texarkana, TX 76049	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Rachel, Davis Contributor address; City; State; Zip Code Houston, TX 79070	Amount of Contribution (\$) \$83.34
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/60 Rpt: 52/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/17/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Rachel, Devoto 6 Contributor address; City; State; Zip Code San Antonio, TX 75024	7 Amount of Contribution (\$) \$41.67
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Rachel, Eddy Contributor address; City; State; Zip Code HEATH, TX 77079	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/03/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Rachel, Oakman Contributor address; City; State; Zip Code Wichita Falls, TX 78258	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions) Gegel Anesthesia PC
Date 10/18/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Raul, Gaytan Contributor address; City; State; Zip Code Amarillo, TX 78245	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/04/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Raul, Gaytan Contributor address; City; State; Zip Code Amarillo, TX 76248	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/60 Rpt: 53/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/09/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Raymond, Garcia 6 Contributor address; City; State; Zip Code Granbury, TX 76049	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/25/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Rewa, brown Contributor address; City; State; Zip Code Salado, TX 76226	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) Crna		Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Ridele, Martin Contributor address; City; State; Zip Code Richmond, TX 75035	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Rikysha, Smith Contributor address; City; State; Zip Code Spring, TX 77027	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/23/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Rincy, Varghese Contributor address; City; State; Zip Code Georgetown, TX 76502	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/60 Rpt: 54/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/04/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Rob, Ross 6 Contributor address; City; State; Zip Code Texas, TX 77018	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Robert, Moore Contributor address; City; State; Zip Code Fort Worth, TX 77494	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/03/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Robert Key, DNAP,, CRNA Contributor address; City; State; Zip Code The Woodlands, TX 77546	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/04/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Rodrick Thomas, MSN, APRN, FNP-C,, CRNA Contributor address; City; State; Zip Code Livingston, TX 77584	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Royce, Hollier Contributor address; City; State; Zip Code Tomball, TX 77539	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/60 Rpt: 55/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/17/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Ruth, Himself 6 Contributor address; City; State; Zip Code Georgetown, TX 77503	7 Amount of Contribution (\$) \$41.67
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/07/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Ryan J, Johnson Contributor address; City; State; Zip Code Houston, TX 78132	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/04/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Rylee, Apodaca Contributor address; City; State; Zip Code Houston, TX 76126	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) S., Bowden Contributor address; City; State; Zip Code Fort Worth, TX 76087	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Sabrina, Schroeder Contributor address; City; State; Zip Code Austin, TX 79707	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/60 Rpt: 56/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/16/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Sara, Koerth 6 Contributor address; City; State; Zip Code Nacogdoches, TX 75032	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Sarah, Mueller Contributor address; City; State; Zip Code Inez, TX 77388	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Scott, Bourgeois Contributor address; City; State; Zip Code Sugar Land, TX 78132	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Scott, Richardson Contributor address; City; State; Zip Code La Feria, TX 85013-3635	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) Nurse Anesthetist (CRNA)		Employer (See Instructions)
Date 10/25/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Sean, Flynn Contributor address; City; State; Zip Code Godley, TX 78220	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/60 Rpt: 57/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/30/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Shala, Clucas 6 Contributor address; City; State; Zip Code Rockwall, TX 78550	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Sonia, Estes Contributor address; City; State; Zip Code Dallas, TX 75901	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/14/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Stacy, Tucker Contributor address; City; State; Zip Code Hallsville, TX 77581	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/28/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Stephanie, Moore Contributor address; City; State; Zip Code College Station, TX 75206	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Stephen, Schaefer Contributor address; City; State; Zip Code New Braunfels, TX 77382	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/60 Rpt: 58/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/22/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Steve, Frawley 6 Contributor address; City; State; Zip Code Dallas, TX 77494	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) Crna		9 Employer (See Instructions)
Date 10/15/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Steven, Leach Contributor address; City; State; Zip Code Bayou Vista, TX 75087	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Steven, Powell Contributor address; City; State; Zip Code Spring, TX 79705	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/15/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Stewart, Parnacott Contributor address; City; State; Zip Code Houston, TX 76088	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/26/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Suja, John Contributor address; City; State; Zip Code Dallas, TX 77379	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/60 Rpt: 59/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/01/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) T'Anyia, Carter 6 Contributor address; City; State; Zip Code Dallas, TX 76116	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/14/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Tammy, Moore Contributor address; City; State; Zip Code Houston, TX 75963	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Tamra, Kelly Contributor address; City; State; Zip Code JERSEY VILLAGE, TX 75214	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/30/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Tamra, Kelly Contributor address; City; State; Zip Code Humble, TX 75757	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Tamra (baker), Kelly Contributor address; City; State; Zip Code Humble, TX 77406	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) Crna		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/60 Rpt: 60/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/22/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Taylor, Alva 6 Contributor address; City; State; Zip Code Pearland, TX 77578	7 Amount of Contribution (\$) \$83.33
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/08/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Taylor, Alva Contributor address; City; State; Zip Code Pearland, TX 77563	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/14/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Tessa, Guevara Contributor address; City; State; Zip Code Arlington, TX 78504	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Thanh, Nguyen Contributor address; City; State; Zip Code Houston, TX 76248	Amount of Contribution (\$) \$62.50
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Theresa, LeBleu-Broussard Contributor address; City; State; Zip Code FULSHEAR, TX 77407-4182	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/60 Rpt: 61/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/20/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Thomas Kyle, Reynolds 6 Contributor address; City; State; Zip Code Burleson, TX 77048	7 Amount of Contribution (\$) \$62.50
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 09/26/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Tim, Jeffries Contributor address; City; State; Zip Code Wichita Falls, TX 77494	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 09/28/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Timothy, Morales Contributor address; City; State; Zip Code Missouri City, TX 77845	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Tina, Dores Contributor address; City; State; Zip Code Laredo, TX 77423	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/20/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Trisha, Stroderd Contributor address; City; State; Zip Code Spring, TX 77584	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/60 Rpt: 62/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/11/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Troy, Reed 6 Contributor address; City; State; Zip Code New Braunfels, TX 77546	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/23/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Tyler, Brauneck Contributor address; City; State; Zip Code Helotes, TX 76001	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/10/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Tyler & Emily, Comans Contributor address; City; State; Zip Code Fort Worth, TX 32073	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Tyler Hampton,, CRNA Contributor address; City; State; Zip Code Fort Worth, TX 78526	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) Nurse Anesthetist		Employer (See Instructions)
Date 10/21/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Vaughna, Galvin Contributor address; City; State; Zip Code Benbrook, TX 77382	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/60 Rpt: 63/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/30/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Veronica, Davis 6 Contributor address; City; State; Zip Code Harlingen, TX 77018	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/11/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Veronica, Resendez Contributor address; City; State; Zip Code Austin, TX 75650	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/23/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Wendy, Odell Contributor address; City; State; Zip Code Southlake, TX 78552	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/17/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Wesley, Dupriest Contributor address; City; State; Zip Code Manvel, TX 77498	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)
Date 10/19/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) Yvonne, Murphy Contributor address; City; State; Zip Code Georgetown, TX 78744	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/60 Rpt: 64/68
2 FILER NAME Texas Association of Nurse Anesthetists Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069305
4 Date 09/27/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Yvonne, Murphy 6 Contributor address; City; State; Zip Code Georgetown, TX 78541	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) CRNA		9 Employer (See Instructions)
Date 10/18/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) lina, eisa Contributor address; City; State; Zip Code Sugar Land, TX 79423	Amount of Contribution (\$) \$41.67
Principal occupation / Job title (See Instructions) Crna		Employer (See Instructions)
Date 10/01/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) mark, Cornell Contributor address; City; State; Zip Code San Antonio, TX 77381	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA, Chief		Employer (See Instructions)
Date 10/22/2025	Full name of contributor ☐ out-of-state PAC (ID#: _____) tika, adambi Contributor address; City; State; Zip Code Keller, TX 76513	Amount of Contribution (\$) \$83.33
Principal occupation / Job title (See Instructions) CRNA		Employer (See Instructions)

MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C3

The Instruction Guide explains how to complete this form.

1 Total pages Schedule C3:
Sch: 1/1 Rpt: 65/68

2 FILER NAME

Texas Association of Nurse Anesthetists Political Action Committee

3 Filer ID (Ethics Commission Filers)
00069305

4 Date

10/03/2025

5 Corporation / Labor Organization name

Texas Association of Nurse Anesthetists

6 Amount (\$)

416.00

Date

09/26/2025

Corporation / Labor Organization name

Texas Association of Nurse Anesthetists

Amount (\$)

95.94

NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE **C4**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule C4:
Sch: 1/1 Rpt: 66/68

2 FILER NAME

Texas Association of Nurse Anesthetists Political Action Committee

3 Filer ID (Ethics Commission Filers)
00069305

4 Date

10/17/2025

5 Corporation / Labor Organization name

Texas Association of Nurse Anesthetists

6 Amount (\$)

400.00

Date

10/03/2025

Corporation / Labor Organization name

Texas Association of Nurse Anesthetists

Amount (\$)

400.00

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 67/68	2 FILER NAME Texas Association of Nurse Anesthetists Political Action	3 Filer ID (Ethics Commission Filers) 00069305
4 Date 10/21/2025	5 Payee name Caroline Fairly for Texas	
6 Amount (\$) \$500.00 ☐ Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1800 South Washington St. Amarillo, TX 79102	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/21/2025	Payee name Drew Darby Campaign	
Amount (\$) \$1,000.00 ☐ Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 3284 San Angelo, TX 76902	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2025	Payee name Texas Association of Nurse Anesthetists	
Amount (\$) \$1,074.42 ☐ Expenditure from corporate funds	Payee address; City; State; Zip Code 919 Congress Ave. Suite 720 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Credit card processing of campaign contributions.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 1/1 Rpt: 68/68

2 FILER NAME

Texas Association of Nurse Anesthetists Political Action Committee

3 Filer ID (Ethics Commission Filers)
00069305

4 Date

09/30/2025

5 Name of person from whom amount is received

University Federal Credit Union

8 Amount (\$)

\$0.02

6 Address of person from whom amount is received; City; State; Zip Code

Austin, TX 78704

7 Purpose for which amount is received

☐ Check if political contribution returned to filer