

**GENERAL-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM GPAC
COVER SHEET PG 1**

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00068897	2 Total pages filed: 121			
3 COMMITTEE NAME Battleground Texas		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2026 Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged				
4 COMMITTEE ADDRESS <input checked="" type="checkbox"/> Change of Address ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 25014 Houston, TX 77265						
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.			FIRST Jennifer	MI	
	NICKNAME	LAST Brown	SUFFIX			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); PO Box 11525 Austin, TX 78711		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; PO Box 11525 Austin, TX 78711					
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 270-0583					
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff					
10 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
11 ELECTION	ELECTION DATE Month Day Year			ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		

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**GENERAL-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Battleground Texas		13 FILER ID (Ethics Commission Filers) 00068897
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.)	
15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> 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)	\$ 3,819.86
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 1,941.66
	4. TOTAL POLITICAL EXPENDITURES	\$ 16,572.95
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 559.66
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.

Ms. Jennifer Brown

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

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 121

17 COMMITTEE NAME Battleground Texas	18 Filer ID (Ethics Commission Filers) 00068897
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 3,819.86	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS \$	
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
6. <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
7. <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
8. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
9. <input type="checkbox"/> SCHEDULE E: LOANS \$	
10. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 10,170.79	
11. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$	
12. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
13. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 6,402.16	
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/92 Rpt: 4/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Jayne	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions)
Date 07/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baedeker, Laura	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Oakland, CA 94611	
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baedeker, Laura	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Oakland, CA 94611	
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baedeker, Laura	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Oakland, CA 94611	
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
Date 10/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baedeker, Laura	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Oakland, CA 94611	
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/92 Rpt: 5/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 11/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baedeker, Laura	7 Amount of Contribution (\$) \$1.92
	6 Contributor address; City; State; Zip Code Oakland, CA 94611	
8 Principal occupation / Job title (See Instructions) Writer		9 Employer (See Instructions)
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baedeker, Laura	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Oakland, CA 94611	
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barwinkel, Paulette	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Austin, TX 78731	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berend, Katie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77056	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 08/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berend, Katie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77056	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/92 Rpt: 6/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berend, Katie	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Houston, TX 77056	
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berend, Katie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77056	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berend, Katie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77056	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigham, Cindy	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75074	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigham, Cindy	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75074	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/92 Rpt: 7/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigham, Cindy	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Plano, TX 75074	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigham, Cindy	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75074	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigham, Cindy	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75074	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigham, Cindy	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Plano, TX 75074	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolden, Ada	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77033	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/92 Rpt: 8/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolden, Ada	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Houston, TX 77033	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolden, Ada	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77033	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolden, Ada	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77033	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolden, Ada	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77033	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolden, Ada	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77033	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/92 Rpt: 9/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordow, Alissa	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code San Francisco, CA 94117	
8 Principal occupation / Job title (See Instructions) Dentist		9 Employer (See Instructions)
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordow, Alissa	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code San Francisco, CA 94117	
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions)
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordow, Alissa	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code San Francisco, CA 94117	
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions)
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordow, Alissa	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code San Francisco, CA 94117	
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions)
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordow, Alissa	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code San Francisco, CA 94117	
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/92 Rpt: 10/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 12/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordow, Alissa	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code San Francisco, CA 94117	
8 Principal occupation / Job title (See Instructions) Dentist		9 Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Julie	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75230	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Sarah	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Jersey City, NJ 07307	
Principal occupation / Job title (See Instructions) Media & Advertising		Employer (See Instructions)
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Sarah	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Jersey City, NJ 07307	
Principal occupation / Job title (See Instructions) Media & Advertising		Employer (See Instructions)
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Sarah	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Jersey City, NJ 07307	
Principal occupation / Job title (See Instructions) Media & Advertising		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/92 Rpt: 11/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Sarah	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Jersey City, NJ 07307	
8 Principal occupation / Job title (See Instructions) Media & Advertising		9 Employer (See Instructions)
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Sarah	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Jersey City, NJ 07307	
Principal occupation / Job title (See Instructions) Media & Advertising		Employer (See Instructions)
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Sarah	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Jersey City, NJ 07307	
Principal occupation / Job title (See Instructions) Media & Advertising		Employer (See Instructions)
Date 07/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cato, Mary	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Arlington, TX 76012	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cato, Mary	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Arlington, TX 76012	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/92 Rpt: 12/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cato, Mary	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Arlington, TX 76012	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cato, Mary	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Arlington, TX 76012	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cato, Mary	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Arlington, TX 76012	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cato, Mary	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Arlington, TX 76012	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Ally	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Brooklyn, NY 11216	
Principal occupation / Job title (See Instructions) Brand Strategist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/92 Rpt: 13/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Ally	7 Amount of Contribution (\$) \$2.50
	6 Contributor address; City; State; Zip Code Brooklyn, NY 11216	
8 Principal occupation / Job title (See Instructions) Brand Strategist		9 Employer (See Instructions)
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Ally	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Brooklyn, NY 11216	
Principal occupation / Job title (See Instructions) Brand Strategist		Employer (See Instructions)
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Ally	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Brooklyn, NY 11216	
Principal occupation / Job title (See Instructions) Brand Strategist		Employer (See Instructions)
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Ally	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Brooklyn, NY 11216	
Principal occupation / Job title (See Instructions) Brand Strategist		Employer (See Instructions)
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Ally	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Brooklyn, NY 11216	
Principal occupation / Job title (See Instructions) Brand Strategist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/92 Rpt: 14/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Austin	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code SEATTLE, WA 98109	
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions)
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Austin	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code SEATTLE, WA 98109	
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Austin	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code SEATTLE, WA 98109	
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Austin	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code SEATTLE, WA 98109	
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Austin	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code SEATTLE, WA 98109	
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/92 Rpt: 15/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 12/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Austin	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code SEATTLE, WA 98109	
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions)
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiera, Laura	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code San Francisco, CA 94112	
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiera, Laura	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code San Francisco, CA 94112	
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiera, Laura	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code San Francisco, CA 94112	
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiera, Laura	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code San Francisco, CA 94112	
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/92 Rpt: 16/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 11/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiera, Laura	7 Amount of Contribution (\$) \$1.92
	6 Contributor address; City; State; Zip Code San Francisco, CA 94112	
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiera, Laura	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code San Francisco, CA 94112	
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)
Date 07/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chism-Winfield, Peter	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Portland, OR 97211	
Principal occupation / Job title (See Instructions) Specialist		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chism-Winfield, Peter	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Portland, OR 97211	
Principal occupation / Job title (See Instructions) Specialist		Employer (See Instructions)
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chism-Winfield, Peter	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Portland, OR 97211	
Principal occupation / Job title (See Instructions) Specialist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/92 Rpt: 17/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chism-Winfield, Peter	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Portland, OR 97211	
8 Principal occupation / Job title (See Instructions) Specialist		9 Employer (See Instructions)
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chism-Winfield, Peter	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Portland, OR 97211	
Principal occupation / Job title (See Instructions) Specialist		Employer (See Instructions)
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chism-Winfield, Peter	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Portland, OR 97211	
Principal occupation / Job title (See Instructions) Specialist		Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay, Kimberly	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code New York, NY 10027	
Principal occupation / Job title (See Instructions) Law Graduate		Employer (See Instructions)
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay, Kimberly	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code New York, NY 10027	
Principal occupation / Job title (See Instructions) Law Graduate		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/92 Rpt: 18/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay, Kimberly	7 Amount of Contribution (\$) \$1.92
	6 Contributor address; City; State; Zip Code New York, NY 10027	
8 Principal occupation / Job title (See Instructions) Law Graduate		9 Employer (See Instructions)
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay, Kimberly	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code New York, NY 10027	
Principal occupation / Job title (See Instructions) Law Graduate		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay, Kimberly	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code New York, NY 10027	
Principal occupation / Job title (See Instructions) Law Graduate		Employer (See Instructions)
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay, Kimberly	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code New York, NY 10027	
Principal occupation / Job title (See Instructions) Law Graduate		Employer (See Instructions)
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colyer, Janine	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Maplewood, NJ 07040	
Principal occupation / Job title (See Instructions) Legal business development manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/92 Rpt: 19/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colyer, Janine	7 Amount of Contribution (\$) \$1.92
	6 Contributor address; City; State; Zip Code Maplewood, NJ 07040	
8 Principal occupation / Job title (See Instructions) Legal business development manager		9 Employer (See Instructions)
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colyer, Janine	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Maplewood, NJ 07040	
Principal occupation / Job title (See Instructions) Legal business development manager		Employer (See Instructions)
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cordell, Sara	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78759	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYER, Alison	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Colbert, WA 99005	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYER, Alison	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Colbert, WA 99005	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/92 Rpt: 20/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYER, Alison	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Colbert, WA 99005	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYER, Alison	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Colbert, WA 99005	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeBor, Lianna	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Roslindale, MA 02131	
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions)
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeBor, Lianna	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Roslindale, MA 02131	
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions)
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deane, Alexis	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Los Angeles, CA 90026	
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/92 Rpt: 21/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deane, Alexis	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code Los Angeles, CA 90026	
8 Principal occupation / Job title (See Instructions) Writer		9 Employer (See Instructions)
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deane, Alexis	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Los Angeles, CA 90026	
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deemer, Samuel	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Connoquenessing, PA 16027	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Nina	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Astoria, NY 11105	
Principal occupation / Job title (See Instructions) Production artist		Employer (See Instructions)
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Nina	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Astoria, NY 11105	
Principal occupation / Job title (See Instructions) Production artist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/92 Rpt: 22/121	
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897	
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Nina 6 Contributor address; City; State; Zip Code Astoria, NY 11105	7 Amount of Contribution (\$) \$1.92	
	8 Principal occupation / Job title (See Instructions) Production artist		
9 Employer (See Instructions)	Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Nina Contributor address; City; State; Zip Code Astoria, NY 11105	Amount of Contribution (\$) \$1.92
	Principal occupation / Job title (See Instructions) Production artist		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Nina Contributor address; City; State; Zip Code Astoria, NY 11105	Amount of Contribution (\$) \$1.92	
	Principal occupation / Job title (See Instructions) Production artist		Employer (See Instructions)
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Nina Contributor address; City; State; Zip Code Astoria, NY 11105	Amount of Contribution (\$) \$1.92	
	Principal occupation / Job title (See Instructions) Production artist		Employer (See Instructions)
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drinkward, Lisa Contributor address; City; State; Zip Code St Helena, CA 94574	Amount of Contribution (\$) \$3.85	
	Principal occupation / Job title (See Instructions) Winemaker		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/92 Rpt: 23/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drinkward, Lisa	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code St Helena, CA 94574	
8 Principal occupation / Job title (See Instructions) Winemaker		9 Employer (See Instructions)
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drinkward, Lisa	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code St Helena, CA 94574	
Principal occupation / Job title (See Instructions) Winemaker		Employer (See Instructions)
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drinkward, Lisa	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code St Helena, CA 94574	
Principal occupation / Job title (See Instructions) Winemaker		Employer (See Instructions)
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Theresa	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Montpelier, VT 05602	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions)
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Theresa	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Montpelier, VT 05602	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/92 Rpt: 24/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Theresa 6 Contributor address; City; State; Zip Code Montpelier, VT 05602	7 Amount of Contribution (\$) \$1.92
	8 Principal occupation / Job title (See Instructions) Project Manager	
9 Employer (See Instructions)	Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Theresa Contributor address; City; State; Zip Code Montpelier, VT 05602
	Amount of Contribution (\$) \$1.92	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions)
Date 11/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Theresa Contributor address; City; State; Zip Code Montpelier, VT 05602	Amount of Contribution (\$) \$1.92
	Employer (See Instructions)	
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Theresa Contributor address; City; State; Zip Code Montpelier, VT 05602	Amount of Contribution (\$) \$1.92
	Employer (See Instructions)	
Date 07/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eyler, Rebecca Contributor address; City; State; Zip Code Alexandria, VA 22310	Amount of Contribution (\$) \$8.33
	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/92 Rpt: 25/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eyler, Rebecca	7 Amount of Contribution (\$) \$8.33
	6 Contributor address; City; State; Zip Code Alexandria, VA 22310	
8 Principal occupation / Job title (See Instructions) Writer		9 Employer (See Instructions)
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eyler, Rebecca	Amount of Contribution (\$) \$8.33
	Contributor address; City; State; Zip Code Alexandria, VA 22310	
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eyler, Rebecca	Amount of Contribution (\$) \$8.33
	Contributor address; City; State; Zip Code Alexandria, VA 22310	
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eyler, Rebecca	Amount of Contribution (\$) \$8.33
	Contributor address; City; State; Zip Code Alexandria, VA 22310	
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eyler, Rebecca	Amount of Contribution (\$) \$8.33
	Contributor address; City; State; Zip Code Alexandria, VA 22310	
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/92 Rpt: 26/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farver, Andrew	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Chicago, IL 60647	
8 Principal occupation / Job title (See Instructions) Civil Engineer		9 Employer (See Instructions)
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farver, Andrew	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Chicago, IL 60647	
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions)
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farver, Andrew	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Chicago, IL 60647	
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farver, Andrew	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Chicago, IL 60647	
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions)
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Rosemary	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code West Richland, WA 99353	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/92 Rpt: 27/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Rosemary	7 Amount of Contribution (\$) \$1.92
	6 Contributor address; City; State; Zip Code West Richland, WA 99353	
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions)
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Rosemary	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code West Richland, WA 99353	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Rosemary	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code West Richland, WA 99353	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Rosemary	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code West Richland, WA 99353	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Rosemary	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code West Richland, WA 99353	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/92 Rpt: 28/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, David	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Glendale, CA 91201	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Alyson	Amount of Contribution (\$) \$1.53
	Contributor address; City; State; Zip Code Bend, OR 97702	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Alyson	Amount of Contribution (\$) \$1.53
	Contributor address; City; State; Zip Code Bend, OR 97702	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Alyson	Amount of Contribution (\$) \$1.53
	Contributor address; City; State; Zip Code Bend, OR 97702	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Alyson	Amount of Contribution (\$) \$1.53
	Contributor address; City; State; Zip Code Bend, OR 97702	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/92 Rpt: 29/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 11/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Alyson	7 Amount of Contribution (\$) \$1.53
	6 Contributor address; City; State; Zip Code Bend, OR 97702	
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions)
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Alyson	Amount of Contribution (\$) \$1.53
	Contributor address; City; State; Zip Code Bend, OR 97702	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Rene	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Strongsville, OH 44149	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Rene	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Strongsville, OH 44149	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Rene	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Strongsville, OH 44149	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/92 Rpt: 30/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Rene	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Strongsville, OH 44149	
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions)
Date 11/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Rene	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Strongsville, OH 44149	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 07/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geiger, Sona	Amount of Contribution (\$) \$2.08
	Contributor address; City; State; Zip Code Playa del Rey, CA 90293	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geiger, Sona	Amount of Contribution (\$) \$2.08
	Contributor address; City; State; Zip Code Playa del Rey, CA 90293	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 09/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geiger, Sona	Amount of Contribution (\$) \$2.08
	Contributor address; City; State; Zip Code Playa del Rey, CA 90293	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/92 Rpt: 31/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geiger, Sona	7 Amount of Contribution (\$) \$2.08
	6 Contributor address; City; State; Zip Code Playa del Rey, CA 90293	
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions)
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geiger, Sona	Amount of Contribution (\$) \$2.08
	Contributor address; City; State; Zip Code Playa del Rey, CA 90293	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geiger, Sona	Amount of Contribution (\$) \$2.08
	Contributor address; City; State; Zip Code Playa del Rey, CA 90293	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graner, Brent	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Seattle, WA 98117	
Principal occupation / Job title (See Instructions) Research physicist		Employer (See Instructions)
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graner, Brent	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Seattle, WA 98117	
Principal occupation / Job title (See Instructions) Research physicist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/92 Rpt: 32/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graner, Brent 6 Contributor address; City; State; Zip Code Seattle, WA 98117	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) Research physicist		9 Employer (See Instructions)
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graner, Brent Contributor address; City; State; Zip Code Seattle, WA 98117	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Research physicist		Employer (See Instructions)
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graner, Brent Contributor address; City; State; Zip Code Seattle, WA 98117	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Research physicist		Employer (See Instructions)
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graner, Brent Contributor address; City; State; Zip Code Seattle, WA 98117	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Research physicist		Employer (See Instructions)
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Roberto Contributor address; City; State; Zip Code Pittsburgh, PA 15235	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Research Assistant Professor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/92 Rpt: 33/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Roberto	7 Amount of Contribution (\$) \$2.27
	6 Contributor address; City; State; Zip Code Pittsburgh, PA 15235	
8 Principal occupation / Job title (See Instructions) Research Assistant Professor		9 Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Roberto	Amount of Contribution (\$) \$2.27
	Contributor address; City; State; Zip Code Pittsburgh, PA 15235	
Principal occupation / Job title (See Instructions) Research Assistant Professor		Employer (See Instructions)
Date 10/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Roberto	Amount of Contribution (\$) \$2.27
	Contributor address; City; State; Zip Code Pittsburgh, PA 15235	
Principal occupation / Job title (See Instructions) Research Assistant Professor		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Roberto	Amount of Contribution (\$) \$2.27
	Contributor address; City; State; Zip Code Pittsburgh, PA 15235	
Principal occupation / Job title (See Instructions) Research Assistant Professor		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Roberto	Amount of Contribution (\$) \$2.27
	Contributor address; City; State; Zip Code Pittsburgh, PA 15235	
Principal occupation / Job title (See Instructions) Research Assistant Professor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/92 Rpt: 34/121	
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897	
4 Date 07/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haas, Debra 6 Contributor address; City; State; Zip Code Austin, TX 78722	7 Amount of Contribution (\$) \$5.00	
	8 Principal occupation / Job title (See Instructions) Not Employed		
9 Employer (See Instructions)	Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haas, Debra Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawley, Ruth Contributor address; City; State; Zip Code Livermore, CA 94550	Amount of Contribution (\$) \$3.85	
	Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawley, Ruth Contributor address; City; State; Zip Code Livermore, CA 94550	Amount of Contribution (\$) \$3.85	
	Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawley, Ruth Contributor address; City; State; Zip Code Livermore, CA 94550	Amount of Contribution (\$) \$3.85	
	Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/92 Rpt: 35/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawley, Ruth	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code Livermore, CA 94550	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawley, Ruth	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Livermore, CA 94550	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawley, Ruth	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Livermore, CA 94550	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hiatt, Ryan	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Lincoln, NE 68510	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollmuller, Anne	Amount of Contribution (\$) \$2.15
	Contributor address; City; State; Zip Code Bayville, NY 11709	
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/92 Rpt: 36/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollmuller, Anne	7 Amount of Contribution (\$) \$2.15
	6 Contributor address; City; State; Zip Code Bayville, NY 11709	
8 Principal occupation / Job title (See Instructions) Graduate Student		9 Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollmuller, Anne	Amount of Contribution (\$) \$2.15
	Contributor address; City; State; Zip Code Bayville, NY 11709	
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions)
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollmuller, Anne	Amount of Contribution (\$) \$2.15
	Contributor address; City; State; Zip Code Bayville, NY 11709	
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions)
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollmuller, Anne	Amount of Contribution (\$) \$2.15
	Contributor address; City; State; Zip Code Bayville, NY 11709	
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions)
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollmuller, Anne	Amount of Contribution (\$) \$2.15
	Contributor address; City; State; Zip Code Bayville, NY 11709	
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/92 Rpt: 37/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughey, Richard	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75230	
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions)
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughey, Richard	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Dallas, TX 75230	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughey, Richard	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Dallas, TX 75230	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughey, Richard	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Dallas, TX 75230	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughey, Richard	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Dallas, TX 75230	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/92 Rpt: 38/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 12/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughey, Richard	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75230	
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions)
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Insley, Matt	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Chicago, IL 60618	
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions)
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Insley, Matt	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Chicago, IL 60618	
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions)
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Insley, Matt	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Chicago, IL 60618	
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Insley, Matt	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Chicago, IL 60618	
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/92 Rpt: 39/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 11/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Insley, Matt 6 Contributor address; City; State; Zip Code Chicago, IL 60618	7 Amount of Contribution (\$) \$1.92
8 Principal occupation / Job title (See Instructions) Software Developer		9 Employer (See Instructions)
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Insley, Matt Contributor address; City; State; Zip Code Chicago, IL 60618	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions)
Date 07/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kasten, Nancy Contributor address; City; State; Zip Code Dallas, TX 75229-5560	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kasten, Nancy Contributor address; City; State; Zip Code Dallas, TX 75229-5560	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keane, Mary Elizabeth Contributor address; City; State; Zip Code Shorewood, WI 53211	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/92 Rpt: 40/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keane, Mary Elizabeth	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code Shorewood, WI 53211	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keane, Mary Elizabeth	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Shorewood, WI 53211	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keane, Mary Elizabeth	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Shorewood, WI 53211	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keane, Mary Elizabeth	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Shorewood, WI 53211	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keane, Mary Elizabeth	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Shorewood, WI 53211	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/92 Rpt: 41/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keeley, Elizabeth	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code Washington, DC 20016-3143	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keeley, Elizabeth	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Washington, DC 20016-3143	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keeley, Elizabeth	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Washington, DC 20016-3143	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 07/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenfield, Julie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Antonio, TX 78212	
Principal occupation / Job title (See Instructions) Airport planner		Employer (See Instructions)
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenfield, Julie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Antonio, TX 78212	
Principal occupation / Job title (See Instructions) Airport planner		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/92 Rpt: 42/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenfield, Julie	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78212	
8 Principal occupation / Job title (See Instructions) Airport planner		9 Employer (See Instructions)
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenfield, Julie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Antonio, TX 78212	
Principal occupation / Job title (See Instructions) Airport planner		Employer (See Instructions)
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenfield, Julie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Antonio, TX 78212	
Principal occupation / Job title (See Instructions) Airport planner		Employer (See Instructions)
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenfield, Julie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Antonio, TX 78212	
Principal occupation / Job title (See Instructions) Airport planner		Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kollman, Molly	Amount of Contribution (\$) \$1.53
	Contributor address; City; State; Zip Code Denver, CO 80211	
Principal occupation / Job title (See Instructions) Process Engineer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/92 Rpt: 43/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kollman, Molly	7 Amount of Contribution (\$) \$1.53
	6 Contributor address; City; State; Zip Code Denver, CO 80211	
8 Principal occupation / Job title (See Instructions) Process Engineer		9 Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kollman, Molly	Amount of Contribution (\$) \$1.53
	Contributor address; City; State; Zip Code Denver, CO 80211	
Principal occupation / Job title (See Instructions) Process Engineer		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kollman, Molly	Amount of Contribution (\$) \$1.53
	Contributor address; City; State; Zip Code Denver, CO 80211	
Principal occupation / Job title (See Instructions) Process Engineer		Employer (See Instructions)
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kollman, Molly	Amount of Contribution (\$) \$1.53
	Contributor address; City; State; Zip Code Denver, CO 80211	
Principal occupation / Job title (See Instructions) Process Engineer		Employer (See Instructions)
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovac, Linda	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Kansas City, MO 64111	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/92 Rpt: 44/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovac, Linda	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Kansas City, MO 64111	
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions)
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovac, Linda	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Kansas City, MO 64111	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovac, Linda	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Kansas City, MO 64111	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovac, Linda	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Kansas City, MO 64111	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovac, Linda	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Kansas City, MO 64111	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/92 Rpt: 45/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kriegstein Jacobson, Sami	7 Amount of Contribution (\$) \$1.92
	6 Contributor address; City; State; Zip Code Brooklyn, NY 11211	
8 Principal occupation / Job title (See Instructions) Producer		9 Employer (See Instructions)
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kriegstein Jacobson, Sami	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Brooklyn, NY 11211	
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kriegstein Jacobson, Sami	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Brooklyn, NY 11211	
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions)
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kriegstein Jacobson, Sami	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Brooklyn, NY 11211	
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kriegstein Jacobson, Sami	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Brooklyn, NY 11211	
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/92 Rpt: 46/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 12/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kriegstein Jacobson, Sami	7 Amount of Contribution (\$) \$1.92
	6 Contributor address; City; State; Zip Code Brooklyn, NY 11211	
8 Principal occupation / Job title (See Instructions) Producer		9 Employer (See Instructions)
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kriz, Kenneth	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Hurst, TX 76054	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kriz, Kenneth	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Hurst, TX 76054	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kriz, Kenneth	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Hurst, TX 76054	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kriz, Kenneth	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Hurst, TX 76054	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/92 Rpt: 47/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langan, Eric Andrew	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Winnetka, IL 60093	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langan, Eric Andrew	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Winnetka, IL 60093	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langan, Eric Andrew	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Winnetka, IL 60093	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langan, Eric Andrew	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Winnetka, IL 60093	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langan, Eric Andrew	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Winnetka, IL 60093	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/92 Rpt: 48/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 12/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langan, Eric Andrew	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Winnetka, IL 60093	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 07/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Joshua	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code San Diego, CA 92117	
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions)
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Joshua	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code San Diego, CA 92117	
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions)
Date 09/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Joshua	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code San Diego, CA 92117	
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions)
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Joshua	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code San Diego, CA 92117	
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/92 Rpt: 49/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 11/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Joshua 6 Contributor address; City; State; Zip Code San Diego, CA 92117	7 Amount of Contribution (\$) \$2.50
	8 Principal occupation / Job title (See Instructions) General Manager	
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Joshua Contributor address; City; State; Zip Code San Diego, CA 92117	Amount of Contribution (\$) \$2.50
	Principal occupation / Job title (See Instructions) General Manager	
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Anamaria Contributor address; City; State; Zip Code SEATTLE, WA 98119	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Investment Advisor	
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Anamaria Contributor address; City; State; Zip Code SEATTLE, WA 98119	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Investment Advisor	
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Anamaria Contributor address; City; State; Zip Code SEATTLE, WA 98119	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Investment Advisor	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/92 Rpt: 50/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Anamaria	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code SEATTLE, WA 98119	
8 Principal occupation / Job title (See Instructions) Investment Advisor		9 Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Anamaria	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code SEATTLE, WA 98119	
Principal occupation / Job title (See Instructions) Investment Advisor		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Anamaria	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code SEATTLE, WA 98119	
Principal occupation / Job title (See Instructions) Investment Advisor		Employer (See Instructions)
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longacre-Wilcox, Vanessa	Amount of Contribution (\$) \$1.50
	Contributor address; City; State; Zip Code Seattle, WA 98116	
Principal occupation / Job title (See Instructions) Project manager		Employer (See Instructions)
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longacre-Wilcox, Vanessa	Amount of Contribution (\$) \$1.50
	Contributor address; City; State; Zip Code Seattle, WA 98116	
Principal occupation / Job title (See Instructions) Project manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/92 Rpt: 51/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longacre-Wilcox, Vanessa	7 Amount of Contribution (\$) \$1.50
	6 Contributor address; City; State; Zip Code Seattle, WA 98116	
8 Principal occupation / Job title (See Instructions) Project manager		9 Employer (See Instructions)
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longacre-Wilcox, Vanessa	Amount of Contribution (\$) \$1.50
	Contributor address; City; State; Zip Code Seattle, WA 98116	
Principal occupation / Job title (See Instructions) Project manager		Employer (See Instructions)
Date 11/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longacre-Wilcox, Vanessa	Amount of Contribution (\$) \$1.50
	Contributor address; City; State; Zip Code Seattle, WA 98116	
Principal occupation / Job title (See Instructions) Project manager		Employer (See Instructions)
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longacre-Wilcox, Vanessa	Amount of Contribution (\$) \$1.50
	Contributor address; City; State; Zip Code Seattle, WA 98116	
Principal occupation / Job title (See Instructions) Project manager		Employer (See Instructions)
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Lily	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Washington, DC 20015	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/92 Rpt: 52/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Lily	7 Amount of Contribution (\$) \$2.50
	6 Contributor address; City; State; Zip Code Washington, DC 20015	
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions)
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Lily	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Washington, DC 20015	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Lily	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Washington, DC 20015	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Lily	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Washington, DC 20015	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Lily	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Washington, DC 20015	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/92 Rpt: 53/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntosh, Michele	7 Amount of Contribution (\$) \$1.15
	6 Contributor address; City; State; Zip Code Raleigh, NC 27604	
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions)
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntosh, Michele	Amount of Contribution (\$) \$1.15
	Contributor address; City; State; Zip Code Raleigh, NC 27604	
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntosh, Michele	Amount of Contribution (\$) \$1.15
	Contributor address; City; State; Zip Code Raleigh, NC 27604	
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntosh, Michele	Amount of Contribution (\$) \$1.15
	Contributor address; City; State; Zip Code Raleigh, NC 27604	
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntosh, Michele	Amount of Contribution (\$) \$1.15
	Contributor address; City; State; Zip Code Raleigh, NC 27604	
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/92 Rpt: 54/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 12/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntosh, Michele	7 Amount of Contribution (\$) \$1.15
	6 Contributor address; City; State; Zip Code Raleigh, NC 27604	
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions)
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Camas, WA 98607	
Principal occupation / Job title (See Instructions) Valuation Specialist		Employer (See Instructions)
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Camas, WA 98607	
Principal occupation / Job title (See Instructions) Valuation Specialist		Employer (See Instructions)
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Camas, WA 98607	
Principal occupation / Job title (See Instructions) Valuation Specialist		Employer (See Instructions)
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Camas, WA 98607	
Principal occupation / Job title (See Instructions) Valuation Specialist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/92 Rpt: 55/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	7 Amount of Contribution (\$) \$2.00
	6 Contributor address; City; State; Zip Code Camas, WA 98607	
8 Principal occupation / Job title (See Instructions) Valuation Specialist		9 Employer (See Instructions)
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Camas, WA 98607	
Principal occupation / Job title (See Instructions) Valuation Specialist		Employer (See Instructions)
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Camas, WA 98607	
Principal occupation / Job title (See Instructions) Valuation Specialist		Employer (See Instructions)
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Camas, WA 98607	
Principal occupation / Job title (See Instructions) Valuation Specialist		Employer (See Instructions)
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Camas, WA 98607	
Principal occupation / Job title (See Instructions) Valuation Specialist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/92 Rpt: 56/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 11/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	7 Amount of Contribution (\$) \$2.00
	6 Contributor address; City; State; Zip Code Camas, WA 98607	
8 Principal occupation / Job title (See Instructions) Valuation Specialist		9 Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Camas, WA 98607	
Principal occupation / Job title (See Instructions) Valuation Specialist		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Camas, WA 98607	
Principal occupation / Job title (See Instructions) Valuation Specialist		Employer (See Instructions)
Date 07/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Nick	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code Rochester, MN 55902	
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions)
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Nick	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code Rochester, MN 55902	
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/92 Rpt: 57/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Nick 6 Contributor address; City; State; Zip Code Rochester, MN 55902	7 Amount of Contribution (\$) \$7.69
	8 Principal occupation / Job title (See Instructions) Healthcare	
Date 10/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Nick Contributor address; City; State; Zip Code Rochester, MN 55902	Amount of Contribution (\$) \$7.69
	Principal occupation / Job title (See Instructions) Healthcare	
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Nick Contributor address; City; State; Zip Code Rochester, MN 55902	Amount of Contribution (\$) \$7.69
	Principal occupation / Job title (See Instructions) Healthcare	
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Nick Contributor address; City; State; Zip Code Rochester, MN 55902	Amount of Contribution (\$) \$7.69
	Principal occupation / Job title (See Instructions) Healthcare	
Date 07/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Sara Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$8.33
	Principal occupation / Job title (See Instructions) Development Director	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/92 Rpt: 58/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Sara 6 Contributor address; City; State; Zip Code Denver, CO 80203	7 Amount of Contribution (\$) \$8.33
	8 Principal occupation / Job title (See Instructions) Development Director	
Date 09/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Sara Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$8.33
	Principal occupation / Job title (See Instructions) Development Director	
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Sara Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$8.33
	Principal occupation / Job title (See Instructions) Development Director	
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Sara Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$8.33
	Principal occupation / Job title (See Instructions) Development Director	
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Sara Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$8.33
	Principal occupation / Job title (See Instructions) Development Director	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/92 Rpt: 59/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molnar, Melanie	7 Amount of Contribution (\$) \$1.92
	6 Contributor address; City; State; Zip Code Chicago, IL 60657	
8 Principal occupation / Job title (See Instructions) Assistant General Manager		9 Employer (See Instructions)
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molnar, Melanie	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Chicago, IL 60657	
Principal occupation / Job title (See Instructions) Assistant General Manager		Employer (See Instructions)
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molnar, Melanie	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Chicago, IL 60657	
Principal occupation / Job title (See Instructions) Assistant General Manager		Employer (See Instructions)
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molnar, Melanie	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Chicago, IL 60657	
Principal occupation / Job title (See Instructions) Assistant General Manager		Employer (See Instructions)
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molnar, Melanie	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Chicago, IL 60657	
Principal occupation / Job title (See Instructions) Assistant General Manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/92 Rpt: 60/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molnar, Melanie	7 Amount of Contribution (\$) \$1.92
	6 Contributor address; City; State; Zip Code Chicago, IL 60657	
8 Principal occupation / Job title (See Instructions) Assistant General Manager		9 Employer (See Instructions)
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Traci	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Shepherdstown, WV 25443	
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions)
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Traci	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Shepherdstown, WV 25443	
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions)
Date 09/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Traci	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Shepherdstown, WV 25443	
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Traci	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Shepherdstown, WV 25443	
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/92 Rpt: 61/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 11/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Traci	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Shepherdstown, WV 25443	
8 Principal occupation / Job title (See Instructions) Technician		9 Employer (See Instructions)
Date 12/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Traci	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Shepherdstown, WV 25443	
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions)
Date 07/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Maura	Amount of Contribution (\$) \$2.27
	Contributor address; City; State; Zip Code St Louis Park, MN 55416	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Maura	Amount of Contribution (\$) \$2.27
	Contributor address; City; State; Zip Code St Louis Park, MN 55416	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Maura	Amount of Contribution (\$) \$2.27
	Contributor address; City; State; Zip Code St Louis Park, MN 55416	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/92 Rpt: 62/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 11/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Maura	7 Amount of Contribution (\$) \$2.27
	6 Contributor address; City; State; Zip Code St Louis Park, MN 55416	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Maura	Amount of Contribution (\$) \$2.27
	Contributor address; City; State; Zip Code St Louis Park, MN 55416	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, kira	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Hoffman estates, IL 60169	
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions)
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, kira	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Hoffman estates, IL 60169	
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, kira	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Hoffman estates, IL 60169	
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/92 Rpt: 63/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, kira 6 Contributor address; City; State; Zip Code Hoffman estates, IL 60169	7 Amount of Contribution (\$) \$1.92
	8 Principal occupation / Job title (See Instructions) Therapist	
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, kira Contributor address; City; State; Zip Code Hoffman estates, IL 60169	Amount of Contribution (\$) \$1.92
	Principal occupation / Job title (See Instructions) Therapist	
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, kira Contributor address; City; State; Zip Code Hoffman estates, IL 60169	Amount of Contribution (\$) \$1.92
	Principal occupation / Job title (See Instructions) Therapist	
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nachtwey, Greg Contributor address; City; State; Zip Code Berkeley, CA 94705	Amount of Contribution (\$) \$200.00
	Principal occupation / Job title (See Instructions) Financial analyst	
Date 07/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Zak Contributor address; City; State; Zip Code Seattle, WA 98133	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) Patient Services Specialist	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/92 Rpt: 64/121	
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897	
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Zak 6 Contributor address; City; State; Zip Code Seattle, WA 98133	7 Amount of Contribution (\$) \$1.00	
	8 Principal occupation / Job title (See Instructions) Patient Services Specialist		
9 Employer (See Instructions)	Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Zak Contributor address; City; State; Zip Code Seattle, WA 98133	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) Patient Services Specialist		Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Zak Contributor address; City; State; Zip Code Seattle, WA 98133	Amount of Contribution (\$) \$1.00	
	Principal occupation / Job title (See Instructions) Patient Services Specialist		Employer (See Instructions)
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Zak Contributor address; City; State; Zip Code Seattle, WA 98133	Amount of Contribution (\$) \$1.00	
	Principal occupation / Job title (See Instructions) Patient Services Specialist		Employer (See Instructions)
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Zak Contributor address; City; State; Zip Code Seattle, WA 98133	Amount of Contribution (\$) \$1.00	
	Principal occupation / Job title (See Instructions) Patient Services Specialist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/92 Rpt: 65/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Meagan	7 Amount of Contribution (\$) \$1.92
	6 Contributor address; City; State; Zip Code San Diego, CA 92122	
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Meagan	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code San Diego, CA 92122	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Meagan	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code San Diego, CA 92122	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Meagan	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code San Diego, CA 92122	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Meagan	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code San Diego, CA 92122	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/92 Rpt: 66/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 12/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Meagan	7 Amount of Contribution (\$) \$1.92
	6 Contributor address; City; State; Zip Code San Diego, CA 92122	
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Megan	Amount of Contribution (\$) \$1.54
	Contributor address; City; State; Zip Code CHICAGO, IL 60614	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Megan	Amount of Contribution (\$) \$1.54
	Contributor address; City; State; Zip Code CHICAGO, IL 60614	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Megan	Amount of Contribution (\$) \$1.54
	Contributor address; City; State; Zip Code CHICAGO, IL 60614	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Megan	Amount of Contribution (\$) \$1.54
	Contributor address; City; State; Zip Code CHICAGO, IL 60614	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/92 Rpt: 67/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 11/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Megan	7 Amount of Contribution (\$) \$1.54
	6 Contributor address; City; State; Zip Code CHICAGO, IL 60614	
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions)
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Megan	Amount of Contribution (\$) \$1.54
	Contributor address; City; State; Zip Code CHICAGO, IL 60614	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacillo, Edith	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Boise, ID 83702	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacillo, Edith	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Boise, ID 83702	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacillo, Edith	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Boise, ID 83702	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/92 Rpt: 68/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacillo, Edith	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Boise, ID 83702	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacillo, Edith	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Boise, ID 83702	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacillo, Edith	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Boise, ID 83702	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Taylor	Amount of Contribution (\$) \$1.25
	Contributor address; City; State; Zip Code New York, NY 10016	
Principal occupation / Job title (See Instructions) Investment Banker		Employer (See Instructions)
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Taylor	Amount of Contribution (\$) \$1.25
	Contributor address; City; State; Zip Code New York, NY 10016	
Principal occupation / Job title (See Instructions) Investment Banker		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/92 Rpt: 69/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Taylor	7 Amount of Contribution (\$) \$1.25
	6 Contributor address; City; State; Zip Code New York, NY 10016	
8 Principal occupation / Job title (See Instructions) Investment Banker		9 Employer (See Instructions)
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Taylor	Amount of Contribution (\$) \$1.25
	Contributor address; City; State; Zip Code New York, NY 10016	
Principal occupation / Job title (See Instructions) Investment Banker		Employer (See Instructions)
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Taylor	Amount of Contribution (\$) \$1.25
	Contributor address; City; State; Zip Code New York, NY 10016	
Principal occupation / Job title (See Instructions) Investment Banker		Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Taylor	Amount of Contribution (\$) \$1.25
	Contributor address; City; State; Zip Code New York, NY 10016	
Principal occupation / Job title (See Instructions) Investment Banker		Employer (See Instructions)
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pellico, Ryan	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Hamden, CT 06517	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/92 Rpt: 70/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pellico, Ryan	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Hamden, CT 06517	
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions)
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pellico, Ryan	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Hamden, CT 06517	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pellico, Ryan	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Hamden, CT 06517	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pellico, Ryan	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Hamden, CT 06517	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pellico, Ryan	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Hamden, CT 06517	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/92 Rpt: 71/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petremont, Aimee	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Milford, CT 06460	
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions)
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petremont, Aimee	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Milford, CT 06460	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petremont, Aimee	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Milford, CT 06460	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petremont, Aimee	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Milford, CT 06460	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Livia	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Pittsburgh, PA 15210	
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/92 Rpt: 72/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Livia	7 Amount of Contribution (\$) \$1.92
	6 Contributor address; City; State; Zip Code Pittsburgh, PA 15210	
8 Principal occupation / Job title (See Instructions) Software developer		9 Employer (See Instructions)
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Livia	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Pittsburgh, PA 15210	
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions)
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Livia	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Pittsburgh, PA 15210	
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions)
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Livia	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Pittsburgh, PA 15210	
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions)
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Livia	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code Pittsburgh, PA 15210	
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/92 Rpt: 73/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Houston, TX 77062	
8 Principal occupation / Job title (See Instructions) Statistician		9 Employer (See Instructions)
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77062	
Principal occupation / Job title (See Instructions) Statistician		Employer (See Instructions)
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77062	
Principal occupation / Job title (See Instructions) Statistician		Employer (See Instructions)
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77062	
Principal occupation / Job title (See Instructions) Statistician		Employer (See Instructions)
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77062	
Principal occupation / Job title (See Instructions) Statistician		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/92 Rpt: 74/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 12/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Houston, TX 77062	
8 Principal occupation / Job title (See Instructions) Statistician		9 Employer (See Instructions)
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reitman, Rachael	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Noho, CA 91606	
Principal occupation / Job title (See Instructions) Branded content		Employer (See Instructions)
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reitman, Rachael	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Noho, CA 91606	
Principal occupation / Job title (See Instructions) Branded content		Employer (See Instructions)
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reitman, Rachael	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Noho, CA 91606	
Principal occupation / Job title (See Instructions) Branded content		Employer (See Instructions)
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reitman, Rachael	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Noho, CA 91606	
Principal occupation / Job title (See Instructions) Branded content		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/92 Rpt: 75/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 11/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reitman, Rachael	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Noho, CA 91606	
8 Principal occupation / Job title (See Instructions) Branded content		9 Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reitman, Rachael	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Noho, CA 91606	
Principal occupation / Job title (See Instructions) Branded content		Employer (See Instructions)
Date 07/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, Mary Esther	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77005	
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, Mary Esther	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77005	
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, Mary Esther	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77005	
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/92 Rpt: 76/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, Mary Esther	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Houston, TX 77005	
8 Principal occupation / Job title (See Instructions) physician		9 Employer (See Instructions)
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, Mary Esther	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77005	
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, Mary Esther	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77005	
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)
Date 07/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Glenda	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Georgetown, TX 78633	
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Glenda	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Georgetown, TX 78633	
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/92 Rpt: 77/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Glenda	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Georgetown, TX 78633	
8 Principal occupation / Job title (See Instructions) none		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Glenda	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Georgetown, TX 78633	
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Glenda	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Georgetown, TX 78633	
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Glenda	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Georgetown, TX 78633	
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart	Amount of Contribution (\$) \$7.70
	Contributor address; City; State; Zip Code Boston, MA 02116	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/92 Rpt: 78/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart 6 Contributor address; City; State; Zip Code Boston, MA 02116	7 Amount of Contribution (\$) \$7.70
	8 Principal occupation / Job title (See Instructions) Engineer	
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart Contributor address; City; State; Zip Code Boston, MA 02116	Amount of Contribution (\$) \$7.70
	Principal occupation / Job title (See Instructions) Engineer	
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart Contributor address; City; State; Zip Code Boston, MA 02116	Amount of Contribution (\$) \$7.70
	Principal occupation / Job title (See Instructions) Engineer	
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart Contributor address; City; State; Zip Code Boston, MA 02116	Amount of Contribution (\$) \$7.70
	Principal occupation / Job title (See Instructions) Engineer	
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudman, Denise Contributor address; City; State; Zip Code Manchester, NH 03104	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) Not Employed	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/92 Rpt: 79/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudman, Denise	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Manchester, NH 03104	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudman, Denise	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Manchester, NH 03104	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudman, Denise	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Manchester, NH 03104	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabia, Colin	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Tacoma, WA 98407	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabia, Colin	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Tacoma, WA 98407	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/92 Rpt: 80/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabia, Colin	7 Amount of Contribution (\$) \$3.85
	6 Contributor address; City; State; Zip Code Tacoma, WA 98407	
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions)
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabia, Colin	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Tacoma, WA 98407	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabia, Colin	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Tacoma, WA 98407	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabia, Colin	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Tacoma, WA 98407	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuffelen, Adriaan Cody	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code Palo Alto, CA 94306	
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/92 Rpt: 81/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuffelen, Adriaan Cody	7 Amount of Contribution (\$) \$7.69
	6 Contributor address; City; State; Zip Code Palo Alto, CA 94306	
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuffelen, Adriaan Cody	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code Palo Alto, CA 94306	
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuffelen, Adriaan Cody	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code Palo Alto, CA 94306	
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuffelen, Adriaan Cody	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code Palo Alto, CA 94306	
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 07/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Alan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Portland, OR 97202	
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/92 Rpt: 82/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Alan	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Portland, OR 97202	
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions)
Date 09/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Alan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Portland, OR 97202	
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Alan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Portland, OR 97202	
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Alan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Portland, OR 97202	
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Alan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Portland, OR 97202	
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/92 Rpt: 83/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Nathan	7 Amount of Contribution (\$) \$2.50
	6 Contributor address; City; State; Zip Code Denver, CO 80203	
8 Principal occupation / Job title (See Instructions) Sustainability Consultant		9 Employer (See Instructions)
Date 08/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Nathan	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Denver, CO 80203	
Principal occupation / Job title (See Instructions) Sustainability Consultant		Employer (See Instructions)
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Nathan	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Denver, CO 80203	
Principal occupation / Job title (See Instructions) Sustainability Consultant		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Nathan	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Denver, CO 80203	
Principal occupation / Job title (See Instructions) Sustainability Consultant		Employer (See Instructions)
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Nathan	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Denver, CO 80203	
Principal occupation / Job title (See Instructions) Sustainability Consultant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/92 Rpt: 84/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Regina	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Kyle, TX 78640	
8 Principal occupation / Job title (See Instructions) Social worker		9 Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobin, Kathryn	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Waltham, MA 02453	
Principal occupation / Job title (See Instructions) Admin assistant		Employer (See Instructions)
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobin, Kathryn	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Waltham, MA 02453	
Principal occupation / Job title (See Instructions) Admin assistant		Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobin, Kathryn	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Waltham, MA 02453	
Principal occupation / Job title (See Instructions) Admin assistant		Employer (See Instructions)
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobin, Kathryn	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Waltham, MA 02453	
Principal occupation / Job title (See Instructions) Admin assistant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/92 Rpt: 85/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 11/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobin, Kathryn	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Waltham, MA 02453	
8 Principal occupation / Job title (See Instructions) Admin assistant		9 Employer (See Instructions)
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobin, Kathryn	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Waltham, MA 02453	
Principal occupation / Job title (See Instructions) Admin assistant		Employer (See Instructions)
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sommer, Sarah	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Westport, CT 06880	
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions)
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sommer, Sarah	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Westport, CT 06880	
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions)
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sommer, Sarah	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Westport, CT 06880	
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/92 Rpt: 86/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sommer, Sarah	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Westport, CT 06880	
8 Principal occupation / Job title (See Instructions) Program Manager		9 Employer (See Instructions)
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sommer, Sarah	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Westport, CT 06880	
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions)
Date 07/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tchou, Philip	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Antonio, TX 78251	
Principal occupation / Job title (See Instructions) Medical Physicist		Employer (See Instructions)
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tchou, Philip	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Antonio, TX 78251	
Principal occupation / Job title (See Instructions) Medical Physicist		Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tchou, Philip	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Antonio, TX 78251	
Principal occupation / Job title (See Instructions) Medical Physicist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/92 Rpt: 87/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tchou, Philip 6 Contributor address; City; State; Zip Code San Antonio, TX 78251	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Medical Physicist		9 Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tchou, Philip Contributor address; City; State; Zip Code San Antonio, TX 78251	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Medical Physicist		Employer (See Instructions)
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tchou, Philip Contributor address; City; State; Zip Code San Antonio, TX 78251	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Medical Physicist		Employer (See Instructions)
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vohs, Annie Contributor address; City; State; Zip Code LaCygne, KS 66040	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions)
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Marina Contributor address; City; State; Zip Code Brooklyn, NY 11225	Amount of Contribution (\$) \$7.69
Principal occupation / Job title (See Instructions) Postdoctoral Fellow		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/92 Rpt: 88/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Marina	7 Amount of Contribution (\$) \$7.69
	6 Contributor address; City; State; Zip Code Brooklyn, NY 11225	
8 Principal occupation / Job title (See Instructions) Postdoctoral Fellow		9 Employer (See Instructions)
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Marina	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code Brooklyn, NY 11225	
Principal occupation / Job title (See Instructions) Postdoctoral Fellow		Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Marina	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code Brooklyn, NY 11225	
Principal occupation / Job title (See Instructions) Postdoctoral Fellow		Employer (See Instructions)
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Marina	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code Brooklyn, NY 11225	
Principal occupation / Job title (See Instructions) Postdoctoral Fellow		Employer (See Instructions)
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Marina	Amount of Contribution (\$) \$7.69
	Contributor address; City; State; Zip Code Brooklyn, NY 11225	
Principal occupation / Job title (See Instructions) Postdoctoral Fellow		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/92 Rpt: 89/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Marion C	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Fort Collins, CO 80525	
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions)
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Matthew	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Seattle, WA 98117	
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions)
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Matthew	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Seattle, WA 98117	
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions)
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Matthew	Amount of Contribution (\$) \$3.85
	Contributor address; City; State; Zip Code Seattle, WA 98117	
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions)
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Matthew	Amount of Contribution (\$) \$4.61
	Contributor address; City; State; Zip Code Seattle, WA 98117	
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/92 Rpt: 90/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 11/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Matthew	7 Amount of Contribution (\$) \$4.61
	6 Contributor address; City; State; Zip Code Seattle, WA 98117	
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions)
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Matthew	Amount of Contribution (\$) \$4.61
	Contributor address; City; State; Zip Code Seattle, WA 98117	
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions)
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wicker, Paul	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Austin, TX 78759	
Principal occupation / Job title (See Instructions) IT Project Manager		Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Windham, Emily	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code White Hall, MD 21161	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Windham, Emily	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code White Hall, MD 21161	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/92 Rpt: 91/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Windham, Emily	7 Amount of Contribution (\$) \$1.92
	6 Contributor address; City; State; Zip Code White Hall, MD 21161	
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions)
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Windham, Emily	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code White Hall, MD 21161	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Windham, Emily	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code White Hall, MD 21161	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Windham, Emily	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code White Hall, MD 21161	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 07/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78722	
Principal occupation / Job title (See Instructions) Volunteer & Events Coordinator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/92 Rpt: 92/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Austin, TX 78722	
8 Principal occupation / Job title (See Instructions) Volunteer & Events Coordinator		9 Employer (See Instructions)
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78722	
Principal occupation / Job title (See Instructions) Volunteer & Events Coordinator		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78722	
Principal occupation / Job title (See Instructions) Volunteer & Events Coordinator		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78722	
Principal occupation / Job title (See Instructions) Volunteer & Events Coordinator		Employer (See Instructions)
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78722	
Principal occupation / Job title (See Instructions) Volunteer & Events Coordinator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/92 Rpt: 93/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeary, Linda	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Whitney, TX 76692	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ziger, Brian	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Round Rock, TX 78665	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zumbach, Mallory	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Portland, OR 97202	
Principal occupation / Job title (See Instructions) Small Business Owner - Music Synchronization		Employer (See Instructions)
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zumbach, Mallory	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Portland, OR 97202	
Principal occupation / Job title (See Instructions) Small Business Owner - Music Synchronization		Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zumbach, Mallory	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Portland, OR 97202	
Principal occupation / Job title (See Instructions) Small Business Owner - Music Synchronization		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/92 Rpt: 94/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zumbach, Mallory 6 Contributor address; City; State; Zip Code Portland, OR 97202	7 Amount of Contribution (\$) \$1.00
	8 Principal occupation / Job title (See Instructions) Small Business Owner - Music Synchronization	
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zumbach, Mallory Contributor address; City; State; Zip Code Portland, OR 97202	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) Small Business Owner - Music Synchronization	
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zumbach, Mallory Contributor address; City; State; Zip Code Portland, OR 97202	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) Small Business Owner - Music Synchronization	
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) smith-howe, abbie Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$2.50
	Principal occupation / Job title (See Instructions) occupational therapist	
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) smith-howe, abbie Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$2.50
	Principal occupation / Job title (See Instructions) occupational therapist	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/92 Rpt: 95/121
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) smith-howe, abbie	7 Amount of Contribution (\$) \$2.50
	6 Contributor address; City; State; Zip Code Medford, MA 02155	
8 Principal occupation / Job title (See Instructions) occupational therapist		9 Employer (See Instructions)
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) smith-howe, abbie	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Medford, MA 02155	
Principal occupation / Job title (See Instructions) occupational therapist		Employer (See Instructions)
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) smith-howe, abbie	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Medford, MA 02155	
Principal occupation / Job title (See Instructions) occupational therapist		Employer (See Instructions)
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) smith-howe, abbie	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Medford, MA 02155	
Principal occupation / Job title (See Instructions) occupational therapist		Employer (See Instructions)
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) van Gelder, Diane	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Watauga, TX 76148	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/13 Rpt: 96/121	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 12/31/2025	5 Payee name ActBlue	
6 Amount (\$) \$152.53	7 Payee address; City; State; Zip Code 366 Summer St. Somerville, MA 02144	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/29/2025	Payee name Amalgamated Bank	
Amount (\$) \$26.00	Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/04/2025	Payee name Amalgamated Bank	
Amount (\$) \$49.90	Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/13 Rpt: 97/121	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/28/2025	5 Payee name Amalgamated Bank	
6 Amount (\$) \$26.00	7 Payee address; City; 280 7th Ave. New York, NY 10008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 09/03/2025	Payee name Amalgamated Bank	
Amount (\$) \$49.90	Payee address; City; 280 7th Ave. New York, NY 10008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 09/26/2025	Payee name Amalgamated Bank	
Amount (\$) \$26.00	Payee address; City; 280 7th Ave. New York, NY 10008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/13 Rpt: 98/121	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/29/2025	5 Payee name Amalgamated Bank	
6 Amount (\$) \$26.00	7 Payee address; City; 280 7th Ave. New York, NY 10008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 11/30/2025	Payee name Amalgamated Bank	
Amount (\$) \$26.00	Payee address; City; 280 7th Ave. New York, NY 10008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/30/2025	Payee name Amalgamated Bank	
Amount (\$) \$26.00	Payee address; City; 280 7th Ave. New York, NY 10008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/13 Rpt: 99/121	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/29/2025	5 Payee name Amalgamated Bank	
6 Amount (\$) \$26.00	7 Payee address; City; 280 7th Ave. New York, NY 10008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 07/31/2025	Payee name Amalgamated Bank	
Amount (\$) \$0.25	Payee address; City; 280 7th Ave. New York, NY 10008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 08/28/2025	Payee name Amalgamated Bank	
Amount (\$) \$29.45	Payee address; City; 280 7th Ave. New York, NY 10008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/13 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/26/2025	5 Payee name Amalgamated Bank	
6 Amount (\$) \$27.60	7 Payee address; City; 280 7th Ave. New York, NY 10008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 09/30/2025	Payee name Amalgamated Bank	
Amount (\$) \$0.25	Payee address; City; 280 7th Ave. New York, NY 10008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 10/29/2025	Payee name Amalgamated Bank	
Amount (\$) \$26.00	Payee address; City; 280 7th Ave. New York, NY 10008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/13 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/31/2025	5 Payee name Amalgamated Bank	
6 Amount (\$) \$0.25	7 Payee address; City; 280 7th Ave. New York, NY 10008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 11/26/2025	Payee name Amalgamated Bank	
Amount (\$) \$29.45	Payee address; City; 280 7th Ave. New York, NY 10008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/30/2025	Payee name Amalgamated Bank	
Amount (\$) \$27.15	Payee address; City; 280 7th Ave. New York, NY 10008	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/13 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 12/31/2025	5 Payee name Amalgamated Bank	
6 Amount (\$) \$0.25	7 Payee address; City; 280 7th Ave. New York, NY 10008	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/03/2025	Payee name American Express	Office held
Amount (\$) \$1,758.13	Payee address; City; 200 Vesey St New York, NY 10285	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 11/05/2025	Payee name American Express	Office held
Amount (\$) \$598.40	Payee address; City; 200 Vesey St New York, NY 10285	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/13 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/01/2025	5 Payee name American Express	
6 Amount (\$) \$769.41	7 Payee address; City; 200 Vesey St New York, NY 10285	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 08/22/2025	Payee name American Express	Office held
Amount (\$) \$729.78	Payee address; City; 200 Vesey St New York, NY 10285	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 08/07/2025	Payee name American Express	Office held
Amount (\$) \$805.06	Payee address; City; 200 Vesey St New York, NY 10285	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/13 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/03/2025	5 Payee name Gusto	
6 Amount (\$) \$85.28	7 Payee address; City; 525 20th St San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/05/2025	Payee name Gusto	
Amount (\$) \$85.28	Payee address; City; 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/02/2025	Payee name Gusto	
Amount (\$) \$85.28	Payee address; City; 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/13 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/04/2025	5 Payee name Gusto	
6 Amount (\$) \$85.28	7 Payee address; City; 525 20th St San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/04/2025	Payee name Gusto	
Amount (\$) \$85.28	Payee address; City; 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name Gusto	
Amount (\$) \$85.28	Payee address; City; 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/13 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897	
4 Date 07/11/2025	5 Payee name Intuit - Quickbooks		
6 Amount (\$) \$79.95	7 Payee address; City; 2632 Marine Way Mountain View, CA 94043	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/07/2025	Payee name LGG Group LLC		
Amount (\$) \$1,426.50	Payee address; City; 7905 Cahill Dr Austin, TX 78729	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign finance consulting	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/20/2025	Payee name LGG Group LLC		
Amount (\$) \$36.00	Payee address; City; 7905 Cahill Dr Austin, TX 78729	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign finance consulting	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/13 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/01/2025	5 Payee name Optimize Services LLC	
6 Amount (\$) \$825.00	7 Payee address; City; 90 Canal St Boston, MA 02114	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 10/23/2025	Payee name Optimize Services LLC	Office held
Amount (\$) \$1,125.00	Payee address; City; 90 Canal St Boston, MA 02114	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 07/23/2025	Payee name Prime Seven LLC	Office held
Amount (\$) \$396.50	Payee address; City; 10247 N 108th Drive Sun City, AZ 85351	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/13 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/04/2025	5 Payee name Prime Seven LLC	
6 Amount (\$) \$178.75	7 Payee address; City; 10247 N 108th Drive Sun City, AZ 85351	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/10/2025	Payee name Prime Seven LLC	
Amount (\$) \$130.00	Payee address; City; 10247 N 108th Drive Sun City, AZ 85351	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/03/2025	Payee name Prime Seven LLC	
Amount (\$) \$146.25	Payee address; City; 10247 N 108th Drive Sun City, AZ 85351	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/13 Rpt:	2 FILER NAME Battleground Texas			3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution American Express		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 1,862.26
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$50.15	(b) Date of Charge 07/01/2025	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Email and cloud services	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$163.74	(b) Date of Charge 08/01/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Email and cloud services	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$163.74	(b) Date of Charge 09/01/2025	(c) Date(s) Credit Card Issuer Paid	
PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Email and cloud services	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 2/13 Rpt:	2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,862.26
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$163.74	(b) Date of Charge 10/01/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Email and cloud services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$50.21	(b) Date of Charge 10/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Email and cloud services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$163.74	(b) Date of Charge 12/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Email and cloud services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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 F4:	2 FILER NAME Sch: 3/13 Rpt: Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,862.26
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$285.12	(b) Date of Charge 10/22/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Hotels.com		(b) Payee address; City, State, Zip Code 333 108TH AVE NE Bellevue, WA 98004
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Lodging expense in San Antonio
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$179.79	(b) Date of Charge 10/24/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Hotels.com		(b) Payee address; City, State, Zip Code 333 108TH AVE NE Bellevue, WA 98004
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Lodging expense in San Antonio
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$49.20	(b) Date of Charge 07/14/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Network Solutions		(b) Payee address; City, State, Zip Code 5335 Gate Pkw Jacksonville, FL 32256
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Domain subscription fee
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 4/13 Rpt:	2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,862.26
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$49.20	(b) Date of Charge 08/11/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Network Solutions		(b) Payee address; City, State, Zip Code 5335 Gate Pkw Jacksonville, FL 32256
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Domain subscription fee
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$97.41	(b) Date of Charge 09/06/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Network Solutions		(b) Payee address; City, State, Zip Code 5335 Gate Pkw Jacksonville, FL 32256
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Domain subscription fee
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$407.52	(b) Date of Charge 11/30/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Airbnb		(b) Payee address; City, State, Zip Code 888 Brannan St. San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Lodging expense in San Antonio
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 5/13 Rpt:	2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,862.26
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$50.00	(b) Date of Charge 10/13/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name American Express		(b) Payee address; City, State, Zip Code 200 Vesey St New York, NY 10285
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Renewal fee
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$175.00	(b) Date of Charge 11/12/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name American Express		(b) Payee address; City, State, Zip Code 200 Vesey St New York, NY 10285
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Renewal fee
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$163.74	(b) Date of Charge 07/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Email and cloud services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 6/13 Rpt:	2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,862.26
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$50.14	(b) Date of Charge 08/01/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Email and cloud services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$50.25	(b) Date of Charge 09/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Email and cloud services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$79.95	(b) Date of Charge 08/09/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Intuit - Quickbooks		(b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Accounting services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 7/13 Rpt:	2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,862.26
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$122.59	(b) Date of Charge 09/01/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Intuit - Quickbooks		(b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Accounting services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought		Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$122.59	(b) Date of Charge 10/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Intuit - Quickbooks		(b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Accounting services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought		Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$122.59	(b) Date of Charge 11/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Intuit - Quickbooks		(b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Accounting services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought		Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 8/13 Rpt:	2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,862.26
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$79.95	(b) Date of Charge 11/09/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Intuit - Quickbooks		(b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Accounting services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought		Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$79.95	(b) Date of Charge 12/09/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Intuit - Quickbooks		(b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Accounting services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought		Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$383.63	(b) Date of Charge 07/06/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name SiteGround		(b) Payee address; City, State, Zip Code 700 N. Fairfax St, Suite 614 Alexandria, VA 22314
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Website services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought		Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 9/13 Rpt:	2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,862.26
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$163.74	(b) Date of Charge 11/01/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Email and cloud services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$50.51	(b) Date of Charge 11/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Email and cloud services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$50.51	(b) Date of Charge 12/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Email and cloud services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 10/13 Rpt:	2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,862.26
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$143.56	(b) Date of Charge 08/17/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Network Solutions		(b) Payee address; City, State, Zip Code 5335 Gate Pkw Jacksonville, FL 32256
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Domain subscription fee
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$53.97	(b) Date of Charge 12/24/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Network Solutions		(b) Payee address; City, State, Zip Code 5335 Gate Pkw Jacksonville, FL 32256
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Domain subscription fee
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$122.59	(b) Date of Charge 12/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Intuit - Quickbooks		(b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Accounting services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 11/13 Rpt:	2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,862.26
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$49.20	(b) Date of Charge 09/08/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Network Solutions		(b) Payee address; City, State, Zip Code 5335 Gate Pkw Jacksonville, FL 32256
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Domain subscription fee
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$49.20	(b) Date of Charge 10/06/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Network Solutions		(b) Payee address; City, State, Zip Code 5335 Gate Pkw Jacksonville, FL 32256
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Domain subscription fee
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$49.20	(b) Date of Charge 11/03/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Network Solutions		(b) Payee address; City, State, Zip Code 5335 Gate Pkw Jacksonville, FL 32256
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Domain subscription fee
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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 F4: Sch: 12/13 Rpt:	2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,862.26
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$49.20	(b) Date of Charge 12/01/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Network Solutions		(b) Payee address; City, State, Zip Code 5335 Gate Pkw Jacksonville, FL 32256
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Domain subscription fee
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought		Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$49.20	(b) Date of Charge 12/29/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Network Solutions		(b) Payee address; City, State, Zip Code 5335 Gate Pkw Jacksonville, FL 32256
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Domain subscription fee
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought		Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$122.59	(b) Date of Charge 07/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Intuit - Quickbooks		(b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Accounting services
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought		Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 13/13 Rpt:	2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1,862.26
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$122.59	(b) Date of Charge 08/01/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Intuit - Quickbooks		(b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Accounting services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$79.95	(b) Date of Charge 09/09/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Intuit - Quickbooks		(b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Accounting services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$79.95	(b) Date of Charge 10/09/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Intuit - Quickbooks		(b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Accounting services
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held