

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 # Amount 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 FIRST MI Ms. Jennifer NICKNAME LAST SUFFIX Brown			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE PO Box 11525 Austin, TX 78711			
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 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 Day Year Month Day Year 07/01/2025 THROUGH 12/31/2025			
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	

GO TO PAGE 2

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
EXPENDITURE TOTALS	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3,819.86
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 1,941.66
CONTRIBUTION BALANCE	4. TOTAL POLITICAL EXPENDITURES	\$ 16,572.95
	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 <div style="text-align: right;">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.</div> <div style="text-align: right;">_____ Ms. Jennifer Brown Signature of Campaign Treasurer</div> <div>AFFIX NOTARY STAMP / SEAL ABOVE</div> 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
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17 COMMITTEE NAME Battleground Texas		18 Filer ID (Ethics Commission Filers) 00068897
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
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 <hr/> 6 Contributor address; City; State; Zip Code ROUND ROCK, TX 78681	7 Amount of Contribution (\$) \$10.00
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 <hr/> Contributor address; City; State; Zip Code Oakland, CA 94611	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Oakland, CA 94611	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Oakland, CA 94611	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Oakland, CA 94611	Amount of Contribution (\$) \$1.92
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 <hr/> 6 Contributor address; City; State; Zip Code Oakland, CA 94611	7 Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Oakland, CA 94611	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
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 <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$10.00
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 <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$10.00
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 6 Contributor address; City; State; Zip Code Houston, TX 77056	7 Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$10.00
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 6 Contributor address; City; State; Zip Code Plano, TX 75074	7 Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Houston, TX 77033	Amount of Contribution (\$) \$10.00
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 6 Contributor address; City; State; Zip Code Houston, TX 77033	7 Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Houston, TX 77033	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Houston, TX 77033	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Houston, TX 77033	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Houston, TX 77033	Amount of Contribution (\$) \$10.00
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 6 Contributor address; City; State; Zip Code San Francisco, CA 94117	7 Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$1.00
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 6 Contributor address; City; State; Zip Code San Francisco, CA 94117	7 Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$500.00
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 Contributor address; City; State; Zip Code Jersey City, NJ 07307	Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code Jersey City, NJ 07307	Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code Jersey City, NJ 07307	Amount of Contribution (\$) \$1.00
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 <hr/> 6 Contributor address; City; State; Zip Code Jersey City, NJ 07307	7 Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Jersey City, NJ 07307	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Jersey City, NJ 07307	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$5.00
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 <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76012	7 Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11216	Amount of Contribution (\$) \$2.50
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 6 Contributor address; City; State; Zip Code Brooklyn, NY 11216	7 Amount of Contribution (\$) \$2.50
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 Contributor address; City; State; Zip Code Brooklyn, NY 11216	Amount of Contribution (\$) \$2.50
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 Contributor address; City; State; Zip Code Brooklyn, NY 11216	Amount of Contribution (\$) \$2.50
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 Contributor address; City; State; Zip Code Brooklyn, NY 11216	Amount of Contribution (\$) \$2.50
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 Contributor address; City; State; Zip Code Brooklyn, NY 11216	Amount of Contribution (\$) \$2.50
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 6 Contributor address; City; State; Zip Code SEATTLE, WA 98109	7 Amount of Contribution (\$) \$3.85
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 Contributor address; City; State; Zip Code SEATTLE, WA 98109	Amount of Contribution (\$) \$3.85
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 Contributor address; City; State; Zip Code SEATTLE, WA 98109	Amount of Contribution (\$) \$3.85
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 Contributor address; City; State; Zip Code SEATTLE, WA 98109	Amount of Contribution (\$) \$3.85
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 Contributor address; City; State; Zip Code SEATTLE, WA 98109	Amount of Contribution (\$) \$3.85
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 <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98109	7 Amount of Contribution (\$) \$3.85
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 <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94112	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94112	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94112	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94112	Amount of Contribution (\$) \$1.92
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 <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94112	7 Amount of Contribution (\$) <div style="text-align: right;">\$1.92</div>
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 <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94112	Amount of Contribution (\$) <div style="text-align: right;">\$1.92</div>
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 <hr/> Contributor address; City; State; Zip Code Portland, OR 97211	Amount of Contribution (\$) <div style="text-align: right;">\$5.00</div>
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 <hr/> Contributor address; City; State; Zip Code Portland, OR 97211	Amount of Contribution (\$) <div style="text-align: right;">\$5.00</div>
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 <hr/> Contributor address; City; State; Zip Code Portland, OR 97211	Amount of Contribution (\$) <div style="text-align: right;">\$5.00</div>
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 <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97211	7 Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Portland, OR 97211	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Portland, OR 97211	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10027	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10027	Amount of Contribution (\$) \$1.92
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 <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10027	7 Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10027	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10027	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10027	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Maplewood, NJ 07040	Amount of Contribution (\$) \$1.92
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 6 Contributor address; City; State; Zip Code Maplewood, NJ 07040	7 Amount of Contribution (\$) \$1.92
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 Contributor address; City; State; Zip Code Maplewood, NJ 07040	Amount of Contribution (\$) \$1.92
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 Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Colbert, WA 99005	Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code Colbert, WA 99005	Amount of Contribution (\$) \$1.00
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 <hr/> 6 Contributor address; City; State; Zip Code Colbert, WA 99005	7 Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Colbert, WA 99005	Amount of Contribution (\$) \$1.00
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#: _____) DeBor, Lianna <hr/> Contributor address; City; State; Zip Code Roslindale, MA 02131	Amount of Contribution (\$) \$2.00
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 <hr/> Contributor address; City; State; Zip Code Roslindale, MA 02131	Amount of Contribution (\$) \$2.00
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 <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90026	Amount of Contribution (\$) \$3.85
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 6 Contributor address; City; State; Zip Code Los Angeles, CA 90026	7 Amount of Contribution (\$) \$3.85
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 Contributor address; City; State; Zip Code Los Angeles, CA 90026	Amount of Contribution (\$) \$3.85
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 Contributor address; City; State; Zip Code Connoquenessing, PA 16027	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#: _____) 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 08/24/2025	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)

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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 6 Contributor address; City; State; Zip Code St Helena, CA 94574	7 Amount of Contribution (\$) \$3.85
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 <hr/> 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)
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drinkward, Lisa <hr/> 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)
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Theresa <hr/> 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 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Theresa <hr/> 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)

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 <hr/> 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 <hr/> 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 <hr/> 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 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Theresa <hr/> 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 07/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eyler, Rebecca <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22310	Amount of Contribution (\$) \$8.33
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: 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 6 Contributor address; City; State; Zip Code Alexandria, VA 22310	7 Amount of Contribution (\$) \$8.33
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 Contributor address; City; State; Zip Code Alexandria, VA 22310	Amount of Contribution (\$) \$8.33
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 Contributor address; City; State; Zip Code Alexandria, VA 22310	Amount of Contribution (\$) \$8.33
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 Contributor address; City; State; Zip Code Alexandria, VA 22310	Amount of Contribution (\$) \$8.33
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 Contributor address; City; State; Zip Code Alexandria, VA 22310	Amount of Contribution (\$) \$8.33
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 <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60647	7 Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Chicago, IL 60647	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Chicago, IL 60647	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Chicago, IL 60647	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code West Richland, WA 99353	Amount of Contribution (\$) \$1.92
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 6 Contributor address; City; State; Zip Code West Richland, WA 99353	7 Amount of Contribution (\$) \$1.92
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 Contributor address; City; State; Zip Code West Richland, WA 99353	Amount of Contribution (\$) \$1.92
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 Contributor address; City; State; Zip Code West Richland, WA 99353	Amount of Contribution (\$) \$1.92
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 Contributor address; City; State; Zip Code West Richland, WA 99353	Amount of Contribution (\$) \$1.92
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 Contributor address; City; State; Zip Code West Richland, WA 99353	Amount of Contribution (\$) \$1.92
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 6 Contributor address; City; State; Zip Code Glendale, CA 91201	7 Amount of Contribution (\$) \$25.00
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 Contributor address; City; State; Zip Code Bend, OR 97702	Amount of Contribution (\$) \$1.53
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 Contributor address; City; State; Zip Code Bend, OR 97702	Amount of Contribution (\$) \$1.53
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 Contributor address; City; State; Zip Code Bend, OR 97702	Amount of Contribution (\$) \$1.53
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 Contributor address; City; State; Zip Code Bend, OR 97702	Amount of Contribution (\$) \$1.53
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 <hr/> 6 Contributor address; City; State; Zip Code Bend, OR 97702	7 Amount of Contribution (\$) \$1.53
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 <hr/> Contributor address; City; State; Zip Code Bend, OR 97702	Amount of Contribution (\$) \$1.53
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 <hr/> Contributor address; City; State; Zip Code Strongsville, OH 44149	Amount of Contribution (\$) \$10.00
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 <hr/> Contributor address; City; State; Zip Code Strongsville, OH 44149	Amount of Contribution (\$) \$10.00
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 <hr/> Contributor address; City; State; Zip Code Strongsville, OH 44149	Amount of Contribution (\$) \$10.00
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 6 Contributor address; City; State; Zip Code Strongsville, OH 44149	7 Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Strongsville, OH 44149	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Playa del Rey, CA 90293	Amount of Contribution (\$) \$2.08
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 Contributor address; City; State; Zip Code Playa del Rey, CA 90293	Amount of Contribution (\$) \$2.08
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 Contributor address; City; State; Zip Code Playa del Rey, CA 90293	Amount of Contribution (\$) \$2.08
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 6 Contributor address; City; State; Zip Code Playa del Rey, CA 90293	7 Amount of Contribution (\$) \$2.08
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 Contributor address; City; State; Zip Code Playa del Rey, CA 90293	Amount of Contribution (\$) \$2.08
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 Contributor address; City; State; Zip Code Playa del Rey, CA 90293	Amount of Contribution (\$) \$2.08
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 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 08/25/2025	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)

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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 6 Contributor address; City; State; Zip Code Pittsburgh, PA 15235	7 Amount of Contribution (\$) \$2.27
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 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)
Date 10/12/2025	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)
Date 11/12/2025	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)
Date 12/12/2025	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: 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 6 Contributor address; City; State; Zip Code Livermore, CA 94550	7 Amount of Contribution (\$) \$3.85
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 <hr/> 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 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawley, Ruth <hr/> 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 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hiatt, Ryan <hr/> Contributor address; City; State; Zip Code Lincoln, NE 68510	Amount of Contribution (\$) \$50.00
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 <hr/> Contributor address; City; State; Zip Code Bayville, NY 11709	Amount of Contribution (\$) \$2.15
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 <hr/> 6 Contributor address; City; State; Zip Code Bayville, NY 11709	7 Amount of Contribution (\$) \$2.15
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 <hr/> Contributor address; City; State; Zip Code Bayville, NY 11709	Amount of Contribution (\$) \$2.15
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 <hr/> Contributor address; City; State; Zip Code Bayville, NY 11709	Amount of Contribution (\$) \$2.15
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 <hr/> Contributor address; City; State; Zip Code Bayville, NY 11709	Amount of Contribution (\$) \$2.15
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 <hr/> Contributor address; City; State; Zip Code Bayville, NY 11709	Amount of Contribution (\$) \$2.15
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 6 Contributor address; City; State; Zip Code Dallas, TX 75230	7 Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$10.00
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 <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230	7 Amount of Contribution (\$) \$10.00
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 <hr/> 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 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Insley, Matt <hr/> 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 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Insley, Matt <hr/> 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 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Insley, Matt <hr/> 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)

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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 6 Contributor address; City; State; Zip Code Shorewood, WI 53211	7 Amount of Contribution (\$) \$3.85
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 <hr/> 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)
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keane, Mary Elizabeth <hr/> 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)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keane, Mary Elizabeth <hr/> 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)
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keane, Mary Elizabeth <hr/> 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: 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 6 Contributor address; City; State; Zip Code Washington, DC 20016-3143	7 Amount of Contribution (\$) \$200.00
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 Contributor address; City; State; Zip Code Washington, DC 20016-3143	Amount of Contribution (\$) \$200.00
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 Contributor address; City; State; Zip Code Washington, DC 20016-3143	Amount of Contribution (\$) \$200.00
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 Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$10.00
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 <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78212	7 Amount of Contribution (\$) \$10.00
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 <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$10.00
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 <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$10.00
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 <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$10.00
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 <hr/> Contributor address; City; State; Zip Code Denver, CO 80211	Amount of Contribution (\$) \$1.53
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 <hr/> 6 Contributor address; City; State; Zip Code Denver, CO 80211	7 Amount of Contribution (\$) \$1.53
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 <hr/> Contributor address; City; State; Zip Code Denver, CO 80211	Amount of Contribution (\$) \$1.53
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 <hr/> Contributor address; City; State; Zip Code Denver, CO 80211	Amount of Contribution (\$) \$1.53
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 <hr/> Contributor address; City; State; Zip Code Denver, CO 80211	Amount of Contribution (\$) \$1.53
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 <hr/> Contributor address; City; State; Zip Code Kansas City, MO 64111	Amount of Contribution (\$) \$1.00
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 6 Contributor address; City; State; Zip Code Kansas City, MO 64111	7 Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code Kansas City, MO 64111	Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code Kansas City, MO 64111	Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code Kansas City, MO 64111	Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code Kansas City, MO 64111	Amount of Contribution (\$) \$1.00
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 <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11211	7 Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11211	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11211	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11211	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11211	Amount of Contribution (\$) \$1.92
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 <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11211	7 Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Hurst, TX 76054	Amount of Contribution (\$) \$50.00
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 <hr/> Contributor address; City; State; Zip Code Hurst, TX 76054	Amount of Contribution (\$) \$50.00
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 <hr/> Contributor address; City; State; Zip Code Hurst, TX 76054	Amount of Contribution (\$) \$50.00
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 <hr/> Contributor address; City; State; Zip Code Hurst, TX 76054	Amount of Contribution (\$) \$50.00
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 6 Contributor address; City; State; Zip Code Winnetka, IL 60093	7 Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code Winnetka, IL 60093	Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code Winnetka, IL 60093	Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code Winnetka, IL 60093	Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code Winnetka, IL 60093	Amount of Contribution (\$) \$1.00
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 <hr/> 6 Contributor address; City; State; Zip Code Winnetka, IL 60093	7 Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code San Diego, CA 92117	Amount of Contribution (\$) \$2.50
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 <hr/> Contributor address; City; State; Zip Code San Diego, CA 92117	Amount of Contribution (\$) \$2.50
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 <hr/> Contributor address; City; State; Zip Code San Diego, CA 92117	Amount of Contribution (\$) \$2.50
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 <hr/> Contributor address; City; State; Zip Code San Diego, CA 92117	Amount of Contribution (\$) \$2.50
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 <hr/> 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		9 Employer (See Instructions)
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Joshua <hr/> Contributor address; City; State; Zip Code San Diego, CA 92117	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions)
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Anamaria <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98119	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Investment Advisor		Employer (See Instructions)
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Anamaria <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98119	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Investment Advisor		Employer (See Instructions)
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Anamaria <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98119	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Investment Advisor		Employer (See Instructions)

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 <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98119	7 Amount of Contribution (\$) \$10.00
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 <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98119	Amount of Contribution (\$) \$10.00
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 <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98119	Amount of Contribution (\$) \$10.00
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 <hr/> Contributor address; City; State; Zip Code Seattle, WA 98116	Amount of Contribution (\$) \$1.50
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 <hr/> Contributor address; City; State; Zip Code Seattle, WA 98116	Amount of Contribution (\$) \$1.50
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 <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98116	7 Amount of Contribution (\$) \$1.50
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 <hr/> Contributor address; City; State; Zip Code Seattle, WA 98116	Amount of Contribution (\$) \$1.50
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 <hr/> Contributor address; City; State; Zip Code Seattle, WA 98116	Amount of Contribution (\$) \$1.50
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 <hr/> Contributor address; City; State; Zip Code Seattle, WA 98116	Amount of Contribution (\$) \$1.50
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 <hr/> Contributor address; City; State; Zip Code Washington, DC 20015	Amount of Contribution (\$) \$2.50
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 6 Contributor address; City; State; Zip Code Washington, DC 20015	7 Amount of Contribution (\$) \$2.50
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 Contributor address; City; State; Zip Code Washington, DC 20015	Amount of Contribution (\$) \$2.50
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 Contributor address; City; State; Zip Code Washington, DC 20015	Amount of Contribution (\$) \$2.50
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 Contributor address; City; State; Zip Code Washington, DC 20015	Amount of Contribution (\$) \$2.50
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 Contributor address; City; State; Zip Code Washington, DC 20015	Amount of Contribution (\$) \$2.50
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 6 Contributor address; City; State; Zip Code Raleigh, NC 27604	7 Amount of Contribution (\$) \$1.15
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 Contributor address; City; State; Zip Code Raleigh, NC 27604	Amount of Contribution (\$) \$1.15
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 Contributor address; City; State; Zip Code Raleigh, NC 27604	Amount of Contribution (\$) \$1.15
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 Contributor address; City; State; Zip Code Raleigh, NC 27604	Amount of Contribution (\$) \$1.15
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 Contributor address; City; State; Zip Code Raleigh, NC 27604	Amount of Contribution (\$) \$1.15
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 <hr/> 6 Contributor address; City; State; Zip Code Raleigh, NC 27604	7 Amount of Contribution (\$) \$1.15
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 <hr/> Contributor address; City; State; Zip Code Camas, WA 98607	Amount of Contribution (\$) \$2.00
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 <hr/> Contributor address; City; State; Zip Code Camas, WA 98607	Amount of Contribution (\$) \$2.00
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 <hr/> Contributor address; City; State; Zip Code Camas, WA 98607	Amount of Contribution (\$) \$2.00
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 <hr/> Contributor address; City; State; Zip Code Camas, WA 98607	Amount of Contribution (\$) \$2.00
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 6 Contributor address; City; State; Zip Code Camas, WA 98607	7 Amount of Contribution (\$) \$2.00
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 Contributor address; City; State; Zip Code Camas, WA 98607	Amount of Contribution (\$) \$2.00
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 Contributor address; City; State; Zip Code Camas, WA 98607	Amount of Contribution (\$) \$2.00
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 Contributor address; City; State; Zip Code Camas, WA 98607	Amount of Contribution (\$) \$2.00
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 Contributor address; City; State; Zip Code Camas, WA 98607	Amount of Contribution (\$) \$2.00
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 <hr/> 6 Contributor address; City; State; Zip Code Camas, WA 98607	7 Amount of Contribution (\$) \$2.00
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 <hr/> Contributor address; City; State; Zip Code Camas, WA 98607	Amount of Contribution (\$) \$2.00
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 <hr/> Contributor address; City; State; Zip Code Camas, WA 98607	Amount of Contribution (\$) \$2.00
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 <hr/> Contributor address; City; State; Zip Code Rochester, MN 55902	Amount of Contribution (\$) \$7.69
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 <hr/> Contributor address; City; State; Zip Code Rochester, MN 55902	Amount of Contribution (\$) \$7.69
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 <hr/> 6 Contributor address; City; State; Zip Code Rochester, MN 55902	7 Amount of Contribution (\$) \$7.69
8 Principal occupation / Job title (See Instructions) Healthcare		9 Employer (See Instructions)
Date 10/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Nick <hr/> Contributor address; City; State; Zip Code Rochester, MN 55902	Amount of Contribution (\$) \$7.69
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions)
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Nick <hr/> Contributor address; City; State; Zip Code Rochester, MN 55902	Amount of Contribution (\$) \$7.69
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions)
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Nick <hr/> Contributor address; City; State; Zip Code Rochester, MN 55902	Amount of Contribution (\$) \$7.69
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions)
Date 07/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Sara <hr/> Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$8.33
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions)

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 <hr/> 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		9 Employer (See Instructions)
Date 09/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Sara <hr/> Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$8.33
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions)
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Sara <hr/> Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$8.33
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions)
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Sara <hr/> Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$8.33
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions)
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Sara <hr/> Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$8.33
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions)

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 <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60657	7 Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Chicago, IL 60657	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Chicago, IL 60657	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Chicago, IL 60657	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Chicago, IL 60657	Amount of Contribution (\$) \$1.92
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 <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60657	7 Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Shepherdstown, WV 25443	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Shepherdstown, WV 25443	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Shepherdstown, WV 25443	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Shepherdstown, WV 25443	Amount of Contribution (\$) \$1.00
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 6 Contributor address; City; State; Zip Code Shepherdstown, WV 25443	7 Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code Shepherdstown, WV 25443	Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code St Louis Park, MN 55416	Amount of Contribution (\$) \$2.27
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 Contributor address; City; State; Zip Code St Louis Park, MN 55416	Amount of Contribution (\$) \$2.27
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 Contributor address; City; State; Zip Code St Louis Park, MN 55416	Amount of Contribution (\$) \$2.27
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 <hr/> 6 Contributor address; City; State; Zip Code St Louis Park, MN 55416	7 Amount of Contribution (\$) \$2.27
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 <hr/> Contributor address; City; State; Zip Code St Louis Park, MN 55416	Amount of Contribution (\$) \$2.27
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 <hr/> Contributor address; City; State; Zip Code Hoffman estates, IL 60169	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Hoffman estates, IL 60169	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Hoffman estates, IL 60169	Amount of Contribution (\$) \$1.92
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 <hr/> 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		9 Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, kira <hr/> Contributor address; City; State; Zip Code Hoffman estates, IL 60169	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions)
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, kira <hr/> Contributor address; City; State; Zip Code Hoffman estates, IL 60169	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions)
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nachtwey, Greg <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94705	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Financial analyst		Employer (See Instructions)
Date 07/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Zak <hr/> 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: 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 <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92122	7 Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code San Diego, CA 92122	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code San Diego, CA 92122	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code San Diego, CA 92122	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code San Diego, CA 92122	Amount of Contribution (\$) \$1.92
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 6 Contributor address; City; State; Zip Code San Diego, CA 92122	7 Amount of Contribution (\$) \$1.92
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 Contributor address; City; State; Zip Code CHICAGO, IL 60614	Amount of Contribution (\$) \$1.54
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 Contributor address; City; State; Zip Code CHICAGO, IL 60614	Amount of Contribution (\$) \$1.54
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 Contributor address; City; State; Zip Code CHICAGO, IL 60614	Amount of Contribution (\$) \$1.54
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 Contributor address; City; State; Zip Code CHICAGO, IL 60614	Amount of Contribution (\$) \$1.54
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 6 Contributor address; City; State; Zip Code CHICAGO, IL 60614	7 Amount of Contribution (\$) \$1.54
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 Contributor address; City; State; Zip Code CHICAGO, IL 60614	Amount of Contribution (\$) \$1.54
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 Contributor address; City; State; Zip Code Boise, ID 83702	Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code Boise, ID 83702	Amount of Contribution (\$) \$1.00
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 Contributor address; City; State; Zip Code Boise, ID 83702	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

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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 <hr/> 6 Contributor address; City; State; Zip Code Boise, ID 83702	7 Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Boise, ID 83702	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Boise, ID 83702	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10016	Amount of Contribution (\$) \$1.25
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10016	Amount of Contribution (\$) \$1.25
Principal occupation / Job title (See Instructions) Investment Banker		Employer (See Instructions)

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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 <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10016	7 Amount of Contribution (\$) \$1.25
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10016	Amount of Contribution (\$) \$1.25
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10016	Amount of Contribution (\$) \$1.25
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 <hr/> Contributor address; City; State; Zip Code New York, NY 10016	Amount of Contribution (\$) \$1.25
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 <hr/> Contributor address; City; State; Zip Code Hamden, CT 06517	Amount of Contribution (\$) \$1.00
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 <hr/> 6 Contributor address; City; State; Zip Code Hamden, CT 06517	7 Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Hamden, CT 06517	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Hamden, CT 06517	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Hamden, CT 06517	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Hamden, CT 06517	Amount of Contribution (\$) \$1.00
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: 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 <hr/> 6 Contributor address; City; State; Zip Code Milford, CT 06460	7 Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Milford, CT 06460	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Milford, CT 06460	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Milford, CT 06460	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15210	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions)

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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 6 Contributor address; City; State; Zip Code Pittsburgh, PA 15210	7 Amount of Contribution (\$) \$1.92
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 Contributor address; City; State; Zip Code Pittsburgh, PA 15210	Amount of Contribution (\$) \$1.92
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 Contributor address; City; State; Zip Code Pittsburgh, PA 15210	Amount of Contribution (\$) \$1.92
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 Contributor address; City; State; Zip Code Pittsburgh, PA 15210	Amount of Contribution (\$) \$1.92
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 Contributor address; City; State; Zip Code Pittsburgh, PA 15210	Amount of Contribution (\$) \$1.92
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 6 Contributor address; City; State; Zip Code Houston, TX 77062	7 Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Statistician		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

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 <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77062	7 Amount of Contribution (\$) \$10.00
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 <hr/> Contributor address; City; State; Zip Code Noho, CA 91606	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Noho, CA 91606	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Noho, CA 91606	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Noho, CA 91606	Amount of Contribution (\$) \$1.00
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 <hr/> 6 Contributor address; City; State; Zip Code Noho, CA 91606	7 Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Noho, CA 91606	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$25.00
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 <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$25.00
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 <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)

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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 6 Contributor address; City; State; Zip Code Houston, TX 77005	7 Amount of Contribution (\$) \$25.00
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 Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$25.00
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 Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$25.00
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 Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$5.00
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 Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)

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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 <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$5.00
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 <hr/> Contributor address; City; State; Zip Code Boston, MA 02116	Amount of Contribution (\$) \$7.70
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

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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 <hr/> 6 Contributor address; City; State; Zip Code Boston, MA 02116	7 Amount of Contribution (\$) \$7.70
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart <hr/> Contributor address; City; State; Zip Code Boston, MA 02116	Amount of Contribution (\$) \$7.70
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart <hr/> Contributor address; City; State; Zip Code Boston, MA 02116	Amount of Contribution (\$) \$7.70
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart <hr/> Contributor address; City; State; Zip Code Boston, MA 02116	Amount of Contribution (\$) \$7.70
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudman, Denise <hr/> Contributor address; City; State; Zip Code Manchester, NH 03104	Amount of Contribution (\$) \$1.00
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: 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 <hr/> 6 Contributor address; City; State; Zip Code Manchester, NH 03104	7 Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Manchester, NH 03104	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Manchester, NH 03104	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Tacoma, WA 98407	Amount of Contribution (\$) \$3.85
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 <hr/> Contributor address; City; State; Zip Code Tacoma, WA 98407	Amount of Contribution (\$) \$3.85
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 <hr/> 6 Contributor address; City; State; Zip Code Tacoma, WA 98407	7 Amount of Contribution (\$) \$3.85
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 <hr/> Contributor address; City; State; Zip Code Tacoma, WA 98407	Amount of Contribution (\$) \$3.85
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 <hr/> Contributor address; City; State; Zip Code Tacoma, WA 98407	Amount of Contribution (\$) \$3.85
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 <hr/> Contributor address; City; State; Zip Code Tacoma, WA 98407	Amount of Contribution (\$) \$3.85
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 <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94306	Amount of Contribution (\$) \$7.69
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 <hr/> 6 Contributor address; City; State; Zip Code Palo Alto, CA 94306	7 Amount of Contribution (\$) \$7.69
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 <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94306	Amount of Contribution (\$) \$7.69
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 <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94306	Amount of Contribution (\$) \$7.69
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 <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94306	Amount of Contribution (\$) \$7.69
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 <hr/> Contributor address; City; State; Zip Code Portland, OR 97202	Amount of Contribution (\$) \$10.00
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 6 Contributor address; City; State; Zip Code Portland, OR 97202	7 Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Portland, OR 97202	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Portland, OR 97202	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Portland, OR 97202	Amount of Contribution (\$) \$10.00
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 Contributor address; City; State; Zip Code Portland, OR 97202	Amount of Contribution (\$) \$10.00
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 6 Contributor address; City; State; Zip Code Denver, CO 80203	7 Amount of Contribution (\$) \$2.50
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 Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$2.50
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 Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$2.50
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 Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$2.50
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 Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$2.50
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 <hr/> 6 Contributor address; City; State; Zip Code Kyle, TX 78640	7 Amount of Contribution (\$) \$25.00
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 <hr/> Contributor address; City; State; Zip Code Waltham, MA 02453	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Waltham, MA 02453	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Waltham, MA 02453	Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Waltham, MA 02453	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin assistant		Employer (See Instructions)

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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 <hr/> 6 Contributor address; City; State; Zip Code Waltham, MA 02453	7 Amount of Contribution (\$) <div style="text-align: right;">\$1.00</div>
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 <hr/> Contributor address; City; State; Zip Code Waltham, MA 02453	Amount of Contribution (\$) <div style="text-align: right;">\$1.00</div>
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 <hr/> Contributor address; City; State; Zip Code Westport, CT 06880	Amount of Contribution (\$) <div style="text-align: right;">\$1.00</div>
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 <hr/> Contributor address; City; State; Zip Code Westport, CT 06880	Amount of Contribution (\$) <div style="text-align: right;">\$1.00</div>
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 <hr/> Contributor address; City; State; Zip Code Westport, CT 06880	Amount of Contribution (\$) <div style="text-align: right;">\$1.00</div>
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 <hr/> 6 Contributor address; City; State; Zip Code Westport, CT 06880	7 Amount of Contribution (\$) \$1.00
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 <hr/> Contributor address; City; State; Zip Code Westport, CT 06880	Amount of Contribution (\$) \$1.00
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 <hr/> 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 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tchou, Philip <hr/> 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 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tchou, Philip <hr/> 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)

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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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 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 <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11225	7 Amount of Contribution (\$) \$7.69
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 <hr/> 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)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Marina <hr/> 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)
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Marina <hr/> 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)
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Marina <hr/> 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)

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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 <hr/> 6 Contributor address; City; State; Zip Code Fort Collins, CO 80525	7 Amount of Contribution (\$) \$25.00
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 <hr/> Contributor address; City; State; Zip Code Seattle, WA 98117	Amount of Contribution (\$) \$3.85
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 <hr/> Contributor address; City; State; Zip Code Seattle, WA 98117	Amount of Contribution (\$) \$3.85
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 <hr/> Contributor address; City; State; Zip Code Seattle, WA 98117	Amount of Contribution (\$) \$3.85
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 <hr/> Contributor address; City; State; Zip Code Seattle, WA 98117	Amount of Contribution (\$) \$4.61
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 <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98117	7 Amount of Contribution (\$) \$4.61
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 <hr/> Contributor address; City; State; Zip Code Seattle, WA 98117	Amount of Contribution (\$) \$4.61
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 <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$25.00
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 <hr/> Contributor address; City; State; Zip Code White Hall, MD 21161	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code White Hall, MD 21161	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

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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 <hr/> 6 Contributor address; City; State; Zip Code White Hall, MD 21161	7 Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code White Hall, MD 21161	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code White Hall, MD 21161	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code White Hall, MD 21161	Amount of Contribution (\$) \$1.92
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 <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$10.00
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 <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78722	7 Amount of Contribution (\$) \$10.00
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 <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$10.00
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 <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$10.00
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 <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$10.00
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 <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Volunteer & Events Coordinator		Employer (See Instructions)

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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 6 Contributor address; City; State; Zip Code Whitney, TX 76692	7 Amount of Contribution (\$) \$100.00
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 Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$100.00
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 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		Employer (See Instructions)
Date 08/24/2025	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		Employer (See Instructions)
Date 09/24/2025	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		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 <hr/> 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		9 Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zumbach, Mallory <hr/> 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		Employer (See Instructions)
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zumbach, Mallory <hr/> 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		Employer (See Instructions)
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) smith-howe, abbie <hr/> Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) occupational therapist		Employer (See Instructions)
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) smith-howe, abbie <hr/> Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) occupational therapist		Employer (See Instructions)

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 <hr/> 6 Contributor address; City; State; Zip Code Medford, MA 02155	7 Amount of Contribution (\$) \$2.50
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 <hr/> Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$2.50
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 <hr/> Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$2.50
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 <hr/> Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$2.50
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 <hr/> Contributor address; City; State; Zip Code Watauga, TX 76148	Amount of Contribution (\$) \$50.00
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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/13 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer St. Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card processing fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/29/2025	Candidate/Officeholder name Office sought Office held	
Payee name Amalgamated Bank		
Amount (\$) \$26.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/04/2025	Candidate/Officeholder name Office sought Office held	
Payee name Amalgamated Bank		
Amount (\$) \$49.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Amalgamated Bank		
Amount (\$) \$49.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/26/2025	Candidate/Officeholder name Office sought Office held	
Payee name Amalgamated Bank		
Amount (\$) \$26.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/30/2025	Candidate/Officeholder name Office sought Office held	
Payee name Amalgamated Bank		
Amount (\$) \$26.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/30/2025	Candidate/Officeholder name Office sought Office held	
Payee name Amalgamated Bank		
Amount (\$) \$26.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/31/2025	Candidate/Officeholder name Office sought Office held	
Payee name Amalgamated Bank		
Amount (\$) \$0.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/28/2025	Candidate/Officeholder name Office sought Office held	
Payee name Amalgamated Bank		
Amount (\$) \$29.45 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/30/2025	Candidate/Officeholder name Office sought Office held	
Payee name Amalgamated Bank		
Amount (\$) \$0.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/29/2025	Candidate/Officeholder name Office sought Office held	
Payee name Amalgamated Bank		
Amount (\$) \$26.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/26/2025	Candidate/Officeholder name Office sought Office held	
Payee name Amalgamated Bank		
Amount (\$) \$29.45 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/30/2025	Candidate/Officeholder name Office sought Office held	
Payee name Amalgamated Bank		
Amount (\$) \$27.15 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 280 7th Ave. New York, NY 10008	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2025	Payee name American Express	
Amount (\$) \$1,758.13 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2025	Payee name American Express	
Amount (\$) \$598.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/22/2025	Payee name American Express	
Amount (\$) \$729.78 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/07/2025	Payee name American Express	
Amount (\$) \$805.06 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/13 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/05/2025	Payee name Gusto	
Amount (\$) \$85.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/02/2025	Payee name Gusto	
Amount (\$) \$85.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/13 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 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 <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/04/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$85.28 <input type="checkbox"/> Expenditure from corporate funds	Payee name Gusto Payee address; City; State; Zip Code 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 <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/02/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$85.28 <input type="checkbox"/> Expenditure from corporate funds	Payee name Gusto Payee address; City; State; Zip Code 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 <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/13 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043	
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 <u>ONLY</u> 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 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7905 Cahill Dr Austin, TX 78729	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign finance consulting
Complete <u>ONLY</u> 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 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7905 Cahill Dr Austin, TX 78729	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign finance consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 90 Canal St Boston, MA 02114	
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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/23/2025	Payee name Optimize Services LLC	
Amount (\$) \$1,125.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 90 Canal St Boston, MA 02114	
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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/23/2025	Payee name Prime Seven LLC	
Amount (\$) \$396.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10247 N 108th Drive Sun City, AZ 85351	
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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/13 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 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 10247 N 108th Drive Sun City, AZ 85351	
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 <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/10/2025	Candidate/Officeholder name Office sought Office held	
Payee name Prime Seven LLC		
Amount (\$) \$130.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10247 N 108th Drive Sun City, AZ 85351	
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 <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Prime Seven LLC		
Amount (\$) \$146.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10247 N 108th Drive Sun City, AZ 85351	
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 <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 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	
		(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 \$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	
		(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 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	

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: 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: Sch: 3/13 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 \$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
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: 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 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 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 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: 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
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: 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
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: 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
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: 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
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: 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
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: 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
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: 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
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: 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	