

# CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

1 Filer ID (Ethics Commission Filers) 00070679		2 Total pages filed: 22	OFFICE USE ONLY	
3 COMMITTEE NAME Western WilCo Dems Club		Date Received ELECTRONICALLY FILED 01/08/2026		
4 TREASURER NAME Ravey, Timothy		Date Hand-delivered or Date Postmarked		
5 ORIGINAL REPORT TYPE <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election		<input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer resignation <input type="checkbox"/> Dissolution report <input type="checkbox"/> Other (specify) _____		
6 ORIGINAL PERIOD COVERED Month Day Year 07/01/2025		Month Day Year THROUGH 12/31/2025	Receipt # _____ Amount _____ Date Processed Date Imaged	

## 7 EXPLANATION OF CORRECTION

Overlooked second contribution for same amount.

## 8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

**Semiannual reports:** I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

**Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

\_\_\_\_\_  
Timothy Ravey

\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

\_\_\_\_\_  
Signature of officer administering oath

\_\_\_\_\_  
Printed name of officer administering oath

\_\_\_\_\_  
Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form  
Needed To Report And Explain Corrections**

**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) 00070679	2 Total pages filed: 22
3 COMMITTEE NAME Western WilCo Dems Club		<b>OFFICE USE ONLY</b> <p>Date Received ELECTRONICALLY FILED 01/08/2026</p> <p>Date Hand-delivered or Date Postmarked</p> <p>Receipt # <input type="text"/> Amount <input type="text"/></p> <p>Date Processed</p> <p>Date Imaged</p>	
4 COMMITTEE ADDRESS  <input checked="" type="checkbox"/> Change of Address 11117 Old Quarry Rd  Austin, TX 78717-5112			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR  .....		
	NICKNAME  .....	LAST Ravey	SUFFIX
6 CAMPAIGN TREASURER STREET ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 11117 Old Quarry Rd  Austin, TX 78717-5112		APT / SUITE #; CITY; STATE; ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS  <input checked="" type="checkbox"/> Change of Address	STREET OR PO BOX;  APT / SUITE #; CITY; STATE; ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION (408) 781-5592		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month 07/01/2025	Day	Year 12/31/2025
11 ELECTION	ELECTION DATE Month      Day      Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

**GO TO PAGE 2**

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

**FORM GPAC  
COVER SHEET PG 2**

<b>12 COMMITTEE NAME</b> Western WilCo Dems Club		<b>13 FILER ID</b> (Ethics Commission Filers) 00070679
<b>14 COMMITTEE ACTIVITY</b>  (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.)	
<b>15 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,690.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 600.00
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,370.67
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**16 AFFIDAVIT**

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

Timothy Ravey

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**SUBTOTALS - GPAC****FORM GPAC**  
**COVER SHEET PG 3**  
4 of 22

<b>17</b> COMMITTEE NAME Western WilCo Dems Club	<b>18</b> Filer ID (Ethics Commission Filers) 00070679
<b>19</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 1,690.00	
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 \$ 600.00	
11. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$	
12. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
13. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$	
14. <input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 841.97	
15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/14 Rpt: 5/22
<b>2</b> FILER NAME Western WilCo Dems Club		<b>3</b> Filer ID (Ethics Commission Filers) 00070679
<b>4</b> Date 10/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Clifford	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) NA
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Clifford	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) NA
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaulieu, Rachel	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78729	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) NA
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Natomi	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Leander, TX 78641	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) NA
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Billie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Austin, TX 78729	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/14 Rpt: 6/22
<b>2</b> FILER NAME Western WilCo Dems Club		<b>3</b> Filer ID (Ethics Commission Filers) 00070679
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Billie	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78729	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Billie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Austin, TX 78729	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Billie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Austin, TX 78729	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Billie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Austin, TX 78729	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carls, Beth	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Liberty Hill, TX 78642	
Principal occupation / Job title (See Instructions) Mental Health Entreprenuer		Employer (See Instructions) OneSeventeen Media

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/14 Rpt: 7/22
<b>2</b> FILER NAME Western WilCo Dems Club		<b>3</b> Filer ID (Ethics Commission Filers) 00070679
<b>4</b> Date 11/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chafetz, Linda	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78750	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) NA
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chafetz, Norm	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78750	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chumnanvech, Anita	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Leander, TX 78641	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) NA
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Cathie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Leander, TX 78641	
Principal occupation / Job title (See Instructions) Clerical		Employer (See Instructions) Medical
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Terry G	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Round Rock, TX 78681	
Principal occupation / Job title (See Instructions) Elected Official		Employer (See Instructions) Williamson County

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/14 Rpt: 8/22
<b>2</b> FILER NAME Western WilCo Dems Club		<b>3</b> Filer ID (Ethics Commission Filers) 00070679
<b>4</b> Date 11/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, Carolyn	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Leander, TX 78641	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) NA
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coville, Patty	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dietz, Tim	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78717	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) NA
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doscher, David	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Computer Programmer		Employer (See Instructions) AMD
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doscher, Karen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/14 Rpt: 9/22
<b>2</b> FILER NAME Western WilCo Dems Club		<b>3</b> Filer ID (Ethics Commission Filers) 00070679
<b>4</b> Date 11/02/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, JK	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Cedr Park, TX 78613	
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ducharme, Jacalyn	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Austin, TX 78717	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) NA
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Endres, Michael	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Police Officer		Employer (See Instructions) City of Austin
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flannigan, Jimmy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78729	
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Austin Convention Enterprises Inc.
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Katherine	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/14 Rpt: 10/22
<b>2</b> FILER NAME Western WilCo Dems Club		<b>3</b> Filer ID (Ethics Commission Filers) 00070679
<b>4</b> Date 11/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Richard	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) NA
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilby, Kim Collins	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glover, Christine	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Leander, TX 78641	
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions) Self
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jefts, Heather	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) NA
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Merrimac	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78750	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/14 Rpt: 11/22
<b>2</b> FILER NAME Western WilCo Dems Club		<b>3</b> Filer ID (Ethics Commission Filers) 00070679
<b>4</b> Date 08/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krueger, Karen	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lester, Brigid	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not empl
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lester, Brigid	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not empl
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lester, Brigid	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not empl
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lester, Brigid	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not empl

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/14 Rpt: 12/22
<b>2</b> FILER NAME Western WilCo Dems Club		<b>3</b> Filer ID (Ethics Commission Filers) 00070679
<b>4</b> Date 11/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lester, Brigid	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not empl
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lester, Brigid	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not empl
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mansolo, Leslie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78729	
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Austin Public Health
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Jacquelyn	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78717	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Tx State University
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Travis	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78717	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/14 Rpt: 13/22
<b>2</b> FILER NAME Western WilCo Dems Club		<b>3</b> Filer ID (Ethics Commission Filers) 00070679
<b>4</b> Date 12/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKnight, Barbara	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) NA
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padmanabha, Shweta	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Project Mgr		Employer (See Instructions) Apple
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pelosi, Jan	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78717	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pelosi, Rocco	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78717	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickens, Dave	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78717	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/14 Rpt: 14/22
<b>2</b> FILER NAME Western WilCo Dems Club		<b>3</b> Filer ID (Ethics Commission Filers) 00070679
<b>4</b> Date 08/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickens, Susie	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78717	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Betsy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78729	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Betsy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78729	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Betsy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78729	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 10/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Betsy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78729	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/14 Rpt: 15/22
<b>2</b> FILER NAME Western WilCo Dems Club		<b>3</b> Filer ID (Ethics Commission Filers) 00070679
<b>4</b> Date 11/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Betsy	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78729	
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Betsy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78729	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pokomy, Eric	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Leander, TX 78641	
Principal occupation / Job title (See Instructions) Electrician		Employer (See Instructions) Ampology Electric
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravey, Lucy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78717	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) NA
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravey, Tim	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Austin, TX 78717	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/14 Rpt: 16/22
<b>2</b> FILER NAME Western WilCo Dems Club		<b>3</b> Filer ID (Ethics Commission Filers) 00070679
<b>4</b> Date 11/02/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, Doris	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78729	
<b>8</b> Principal occupation / Job title (See Instructions) Communications/office Coordinator		<b>9</b> Employer (See Instructions) Williamson county
<b>Date</b> 11/05/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauls, Melissa	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Round Rock, TX 78681	
<b>Principal occupation / Job title (See Instructions)</b> Nurse Practitioner		<b>Employer (See Instructions)</b> Austin Gastro
<b>Date</b> 12/05/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sauls, Melissa	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Round Rock, TX 78681	
<b>Principal occupation / Job title (See Instructions)</b> Nurse Practitioner		<b>Employer (See Instructions)</b> Austin Gastro
<b>Date</b> 07/09/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sodoma, Gaye	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Cedar Park, TX 78613	
<b>Principal occupation / Job title (See Instructions)</b> Block Clerk		<b>Employer (See Instructions)</b> Americas Auto Auction
<b>Date</b> 11/02/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Soliz, Jesse	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Cedar Park, TX 78613	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> NA

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/14 Rpt: 17/22
<b>2</b> FILER NAME Western WilCo Dems Club		<b>3</b> Filer ID (Ethics Commission Filers) 00070679
<b>4</b> Date 11/07/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stempko, Jessica	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Round Rock, TX 78681	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) NA
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stempko, Paul	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Round Rock, TX 78681	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stendahl, John	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Cedar Park, TX 78614	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stendahl, Melody	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Cedar Park, TX 78614	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wainer, Lisa	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Austin, TX 78750	
Principal occupation / Job title (See Instructions) Employee benefits		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/14 Rpt: 18/22
<b>2</b> FILER NAME Western WilCo Dems Club		<b>3</b> Filer ID (Ethics Commission Filers) 00070679
<b>4</b> Date 11/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wechsler, Sheron	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Leander, TX 78641	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) NA
Date 07/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Keith	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Round Rock, TX 78681	
Principal occupation / Job title (See Instructions) Hydrogeologist		Employer (See Instructions) BBA
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodard, Owen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Blake A	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Leander, TX 78641-8693	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Texas MedClinic
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Kristen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Leander, TX 78641-8693	
Principal occupation / Job title (See Instructions) Nurse practitioner		Employer (See Instructions) Austin Gastro

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 19/22	2 FILER NAME Western WilCo Dems Club	3 Filer ID (Ethics Commission Filers) 00070679	
4 Date 10/01/2025	5 Payee name Natomi Blair Campaign		
6 Amount (\$) \$300.00	7 Payee address; City; 309 Middle Brook Dr  Leander, TX 78641	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	<p><b>8 PURPOSE OF EXPENDITURE</b></p> <p>(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee</p> <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Natomi Blair for Leander City Council campaign</p>		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Natomi Blair Campaign	Office sought Natomi Blair Campaign	Office held
Date 11/05/2025	Payee name Natomi Blair Campaign		
Amount (\$) \$300.00	Payee address; City; 309 Middle Brook Dr  Leander, TX 78641	State; Zip Code	
<input type="checkbox"/> Expenditure from corporate funds	<p><b>PURPOSE OF EXPENDITURE</b></p> <p>(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee</p> <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Run off election campaign</p>		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Natomi Blair Campaign	Office sought Natomi Blair Campaign	Office held

**NON-POLITICAL EXPENDITURES  
MADE FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE I**

**The Instruction Guide explains how to complete this form.**

1 Total pages Schedule I: Sch: 1/3 Rpt:	2 FILER NAME Western WilCo Dems Club	3 Filer ID (Ethics Commission Filers) 00070679
4 Date 07/09/2025	5 Payee name Central Texas Community	
6 Amount (\$) 206.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 302 N Lampasas St Round Rock, TX 78664	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.) Kerr County Flood Relief
Date 11/29/2025	Payee name HEB	
Amount (\$) 50.13 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1010 W University Ave Georgetown, TX 78628	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) County club awards dinner beverages
Date 07/28/2025	Payee name Name Cheap	
Amount (\$) 6.88 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 4600 E Washington St Phoenix, AZ 85034	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Web Hosting	(b) Description (See instructions regarding type of information required.) Web Hosting
Date 08/28/2025	Payee name Name Cheap	
Amount (\$) 6.88 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 4600 E Washington St Phoenix, AZ 85034	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Web Hosting	(b) Description (See instructions regarding type of information required.) Web Hosting

**NON-POLITICAL EXPENDITURES  
MADE FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE I**

**The Instruction Guide explains how to complete this form.**

1 Total pages Schedule I: Sch: 2/3 Rpt:	2 FILER NAME Western WilCo Dems Club	3 Filer ID (Ethics Commission Filers) 00070679
4 Date 09/28/2025	5 Payee name Name Cheap	
6 Amount (\$) 9.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 4600 E Washington St Phoenix, AZ 85034	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Web Hosting	(b) Description (See instructions regarding type of information required.) Web Hosting
Date 10/28/2025	Payee name Name Cheap	
Amount (\$) 9.88 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 4600 E Washington St Phoenix, AZ 85034	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Web Hosting	(b) Description (See instructions regarding type of information required.) Web Hosting
Date 11/28/2025	Payee name Name Cheap	
Amount (\$) 9.88 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 4600 E Washington St Phoenix, AZ 85034	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Web hosting	(b) Description (See instructions regarding type of information required.) Web hosting
Date 09/15/2025	Payee name Stempko, Paul	
Amount (\$) 43.86 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 8405 Sea Ash Circle Round Rock, TX 78681	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Printing Expense	(b) Description (See instructions regarding type of information required.) Club business cards

**NON-POLITICAL EXPENDITURES  
MADE FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE I**

**The Instruction Guide explains how to complete this form.**

1 Total pages Schedule I: Sch: 3/3 Rpt:	2 FILER NAME Western WilCo Dems Club	3 Filer ID (Ethics Commission Filers) 00070679
4 Date 12/04/2025	5 Payee name TJMax	
6 Amount (\$) 22.70 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 9828 Great Hills Trl  Austin, TX 78759	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.) County Awards Dinner silent auction items
Date 10/28/2025	Payee name Total Wine	
Amount (\$) 412.75 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 11066 Pecan Park Blv  Cedar Park, TX 78613	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) County club awards dinner beverages
Date 12/04/2025	Payee name Total Wine	
Amount (\$) 63.13 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 11066 Pecan Park Blv  Cedar Park, TX 78613	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) County awards dinner beverages