

**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) 00085309 | 2 Total pages filed: 46 | | | |
| 3 COMMITTEE NAME The 134 Political Action Committee | | OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2026 Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged | | | | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address P. O. Box 357 Mineral Wells, TX 76068 | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR Mrs. | | | FIRST Carla S. | MI | |
| | NICKNAME | LAST Porter | SUFFIX | | | |
| 6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); PO BOX 293 Palo Pinto, TX 76484 | | APT / SUITE #; | CITY; | STATE; | ZIP CODE |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | STREET OR PO BOX; PO Box 293 Palo Pinto, TX 76484 | | | | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (940) 329-0514 | | | | | |
| 9 REPORT TYPE | <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff | | | | | |
| 10 PERIOD COVERED | Month 07/01/2025 | Day | Year | Month 12/31/2025 | Day | Year |
| 11 ELECTION | ELECTION DATE Month 03/03/2026 | Day | Year | Primary <input checked="" type="checkbox"/> | Runoff <input type="checkbox"/> | Other <input type="checkbox"/> |
| | | | | General <input type="checkbox"/> | Special <input type="checkbox"/> | |

GO TO PAGE 2

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

**FORM GPAC
COVER SHEET PG 2**

| | | |
|--|---|---|
| 12 COMMITTEE NAME The 134 Political Action Committee | | 13 FILER ID (Ethics Commission Filers) 00085309 |
| 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 checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 3,458.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 3,420.80 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 9,388.80 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |
| 16 AFFIDAVIT | | |
| <p>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.</p> <p style="text-align: right;">Mrs. Carla S. Porter</p> <hr/> <p style="text-align: right;">Signature of Campaign Treasurer</p> | | |
| AFFIX NOTARY STAMP / SEAL ABOVE | | |
| Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office. | | |
| Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath |

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 46

| | |
|---|---|
| 17 COMMITTEE NAME The 134 Political Action Committee | 18 FILER ID (Ethics Commission Filers) 00085309 |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | |
| 1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 3,458.00 | |
| 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 \$ 3,420.80 | |
| 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 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: 1/25 Rpt: 4/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 07/21/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beebe, Hilary | 7 Amount of Contribution (\$) \$25.00 |
| | 6 Contributor address; City; State; Zip Code Marfa, TX 79843 | |
| 8 Principal occupation / Job title (See Instructions) Designer | | 9 Employer (See Instructions) Self |
| Date 08/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beebe, Hilary | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Marfa, TX 79843 | |
| Principal occupation / Job title (See Instructions) Designer | | Employer (See Instructions) Self |
| Date 09/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beebe, Hilary | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Marfa, TX 79843 | |
| Principal occupation / Job title (See Instructions) Designer | | Employer (See Instructions) Self |
| Date 10/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beebe, Hilary | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Marfa, TX 79843 | |
| Principal occupation / Job title (See Instructions) Designer | | Employer (See Instructions) Self |
| Date 11/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beebe, Hilary | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Marfa, TX 79843 | |
| Principal occupation / Job title (See Instructions) Designer | | Employer (See Instructions) Self |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/25 Rpt: 5/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 12/21/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beebe, Hilary | 7 Amount of Contribution (\$) \$25.00 |
| | 6 Contributor address; City; State; Zip Code Marfa, TX 79843 | |
| 8 Principal occupation / Job title (See Instructions) Designer | | 9 Employer (See Instructions) Self |
| Date 10/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock, David | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code Dublin, TX 76446 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 07/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cravens, Richie | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Mertzon, TX 76941 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 08/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cravens, Richie | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Mertzon, TX 76941 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 09/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cravens, Richie | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Mertzon, TX 76941 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/25 Rpt: 6/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 10/06/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cravens, Richie | 7 Amount of Contribution (\$) \$25.00 |
| | 6 Contributor address; City; State; Zip Code Mertzon, TX 76941 | |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 11/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cravens, Richie | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Mertzon, TX 76941 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 12/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cravens, Richie | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Mertzon, TX 76941 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 07/01/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code Lubbock, TX 79407 | |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) GibsonFirm |
| Date 07/02/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code Lubbock, TX 79407 | |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) GibsonFirm |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/25 Rpt: 7/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 08/01/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John 6 Contributor address; City; State; Zip Code Lubbock, TX 79407 | 7 Amount of Contribution (\$) \$50.00 |
| | 8 Principal occupation / Job title (See Instructions) Lawyer | 9 Employer (See Instructions) GibsonFirm |
| Date 08/02/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John Contributor address; City; State; Zip Code Lubbock, TX 79407 | Amount of Contribution (\$) \$50.00 |
| | Principal occupation / Job title (See Instructions) Lawyer | Employer (See Instructions) GibsonFirm |
| Date 09/01/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John Contributor address; City; State; Zip Code Lubbock, TX 79407 | Amount of Contribution (\$) \$50.00 |
| | Principal occupation / Job title (See Instructions) Lawyer | Employer (See Instructions) GibsonFirm |
| Date 09/02/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John Contributor address; City; State; Zip Code Lubbock, TX 79407 | Amount of Contribution (\$) \$50.00 |
| | Principal occupation / Job title (See Instructions) Lawyer | Employer (See Instructions) GibsonFirm |
| Date 10/01/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John Contributor address; City; State; Zip Code Lubbock, TX 79407 | Amount of Contribution (\$) \$50.00 |
| | Principal occupation / Job title (See Instructions) Lawyer | Employer (See Instructions) GibsonFirm |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/25 Rpt: 8/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 10/02/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John 6 Contributor address; City; State; Zip Code Lubbock, TX 79407 | 7 Amount of Contribution (\$) \$50.00 |
| | 8 Principal occupation / Job title (See Instructions) Lawyer | 9 Employer (See Instructions) GibsonFirm |
| Date 11/01/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John Contributor address; City; State; Zip Code Lubbock, TX 79407 | Amount of Contribution (\$) \$50.00 |
| | Principal occupation / Job title (See Instructions) Lawyer | Employer (See Instructions) GibsonFirm |
| Date 11/02/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John Contributor address; City; State; Zip Code Lubbock, TX 79407 | Amount of Contribution (\$) \$50.00 |
| | Principal occupation / Job title (See Instructions) Lawyer | Employer (See Instructions) GibsonFirm |
| Date 12/01/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John Contributor address; City; State; Zip Code Lubbock, TX 79407 | Amount of Contribution (\$) \$50.00 |
| | Principal occupation / Job title (See Instructions) Lawyer | Employer (See Instructions) GibsonFirm |
| Date 12/02/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John Contributor address; City; State; Zip Code Lubbock, TX 79407 | Amount of Contribution (\$) \$50.00 |
| | Principal occupation / Job title (See Instructions) Lawyer | Employer (See Instructions) GibsonFirm |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/25 Rpt: 9/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 07/28/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Samuel 6 Contributor address; City; State; Zip Code bertram, TX 78605 | 7 Amount of Contribution (\$) \$10.00 |
| | 8 Principal occupation / Job title (See Instructions) CNC Programmer | 9 Employer (See Instructions) Kirby Precision Machine |
| Date 08/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Samuel Contributor address; City; State; Zip Code bertram, TX 78605 | Amount of Contribution (\$) \$10.00 |
| | Principal occupation / Job title (See Instructions) CNC Programmer | Employer (See Instructions) Kirby Precision Machine |
| Date 09/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Samuel Contributor address; City; State; Zip Code bertram, TX 78605 | Amount of Contribution (\$) \$10.00 |
| | Principal occupation / Job title (See Instructions) CNC Programmer | Employer (See Instructions) Kirby Precision Machine |
| Date 10/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Samuel Contributor address; City; State; Zip Code bertram, TX 78605 | Amount of Contribution (\$) \$10.00 |
| | Principal occupation / Job title (See Instructions) CNC Programmer | Employer (See Instructions) Kirby Precision Machine |
| Date 11/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Samuel Contributor address; City; State; Zip Code bertram, TX 78605 | Amount of Contribution (\$) \$10.00 |
| | Principal occupation / Job title (See Instructions) CNC Programmer | Employer (See Instructions) Kirby Precision Machine |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/25 Rpt: 10/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 12/28/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Samuel 6 Contributor address; City; State; Zip Code bertram, TX 78605 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) CNC Programmer | | 9 Employer (See Instructions) Kirby Precision Machine |
| Date 07/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grizzard, Joe Contributor address; City; State; Zip Code Boyd, TX 76023 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 08/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grizzard, Joe Contributor address; City; State; Zip Code Boyd, TX 76023 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 09/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grizzard, Joe Contributor address; City; State; Zip Code Boyd, TX 76023 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 10/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grizzard, Joe Contributor address; City; State; Zip Code Boyd, TX 76023 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/25 Rpt: 11/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 11/19/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grizzard, Joe 6 Contributor address; City; State; Zip Code Boyd, TX 76023 | 7 Amount of Contribution (\$) \$25.00 |
| | 8 Principal occupation / Job title (See Instructions) Not Employed | 9 Employer (See Instructions) Not Employed |
| Date 12/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grizzard, Joe Contributor address; City; State; Zip Code Boyd, TX 76023 | Amount of Contribution (\$) \$25.00 |
| | Principal occupation / Job title (See Instructions) Not Employed | Employer (See Instructions) Not Employed |
| Date 07/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN Contributor address; City; State; Zip Code HOUSTON, TX 77252 | Amount of Contribution (\$) \$50.00 |
| | Principal occupation / Job title (See Instructions) assistant director | Employer (See Instructions) University of Texas Houston |
| Date 08/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN Contributor address; City; State; Zip Code HOUSTON, TX 77252 | Amount of Contribution (\$) \$25.00 |
| | Principal occupation / Job title (See Instructions) assistant director | Employer (See Instructions) University of Texas Houston |
| Date 09/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN Contributor address; City; State; Zip Code HOUSTON, TX 77252 | Amount of Contribution (\$) \$25.00 |
| | Principal occupation / Job title (See Instructions) assistant director | Employer (See Instructions) University of Texas Houston |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/25 Rpt: 12/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 10/03/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN 6 Contributor address; City; State; Zip Code HOUSTON, TX 77252 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) assistant director | | 9 Employer (See Instructions) University of Texas Houston |
| Date 11/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN Contributor address; City; State; Zip Code HOUSTON, TX 77252 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) assistant director | | Employer (See Instructions) University of Texas Houston |
| Date 12/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROD, BRIAN Contributor address; City; State; Zip Code HOUSTON, TX 77252 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) assistant director | | Employer (See Instructions) University of Texas Houston |
| Date 07/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Michael Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) security | | Employer (See Instructions) SecureOne |
| Date 08/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Michael Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067 | Amount of Contribution (\$) \$5.00 |
| Principal occupation / Job title (See Instructions) security | | Employer (See Instructions) SecureOne |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/25 Rpt: 13/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 09/21/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Michael | 7 Amount of Contribution (\$) \$5.00 |
| | 6 Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067 | |
| 8 Principal occupation / Job title (See Instructions) security | | 9 Employer (See Instructions) SecureOne |
| Date 10/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Michael | Amount of Contribution (\$) \$5.00 |
| | Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067 | |
| Principal occupation / Job title (See Instructions) security | | Employer (See Instructions) SecureOne |
| Date 11/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Michael | Amount of Contribution (\$) \$5.00 |
| | Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067 | |
| Principal occupation / Job title (See Instructions) security | | Employer (See Instructions) SecureOne |
| Date 12/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Michael | Amount of Contribution (\$) \$5.00 |
| | Contributor address; City; State; Zip Code MINERAL WELLS, TX 76067 | |
| Principal occupation / Job title (See Instructions) security | | Employer (See Instructions) SecureOne |
| Date 09/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Jon Mark | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code San Angelo, TX 76901 | |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Self-Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/25 Rpt: 14/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 10/11/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Jon Mark 6 Contributor address; City; State; Zip Code San Angelo, TX 76901 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) Lawyer | | 9 Employer (See Instructions) Self-Employed |
| Date 11/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Jon Mark Contributor address; City; State; Zip Code San Angelo, TX 76901 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Self-Employed |
| Date 12/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogg, Jon Mark Contributor address; City; State; Zip Code San Angelo, TX 76901 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Self-Employed |
| Date 07/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinsey, Alice Contributor address; City; State; Zip Code Dallas, TX 75203 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 08/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinsey, Alice Contributor address; City; State; Zip Code Dallas, TX 75203 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 12/25 Rpt: 15/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 09/11/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinsey, Alice | 7 Amount of Contribution (\$) \$75.00 |
| | 6 Contributor address; City; State; Zip Code Dallas, TX 75203 | |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 10/17/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinsey, Alice | Amount of Contribution (\$) \$75.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75203 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 11/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinsey, Alice | Amount of Contribution (\$) \$75.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75203 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 12/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinsey, Alice | Amount of Contribution (\$) \$75.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75203 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 07/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code San Angelo, TX 76901 | |
| Principal occupation / Job title (See Instructions) Executive Director | | Employer (See Instructions) San Angelo Early Childhood Center |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | | 1 Total pages Schedule A1: Sch: 13/25 Rpt: 16/46 |
| 2 FILER NAME The 134 Political Action Committee | | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 08/09/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia 6 Contributor address; City; State; Zip Code San Angelo, TX 76901 | 7 Amount of Contribution (\$) \$25.00 | |
| 8 Principal occupation / Job title (See Instructions) Executive Director | | 9 Employer (See Instructions) San Angelo Early Childhood Center | |
| Date 09/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia Contributor address; City; State; Zip Code San Angelo, TX 76901 | Amount of Contribution (\$) \$25.00 | |
| Principal occupation / Job title (See Instructions) Executive Director | | Employer (See Instructions) San Angelo Early Childhood Center | |
| Date 10/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia Contributor address; City; State; Zip Code San Angelo, TX 76901 | Amount of Contribution (\$) \$25.00 | |
| Principal occupation / Job title (See Instructions) Executive Director | | Employer (See Instructions) San Angelo Early Childhood Center | |
| Date 11/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia Contributor address; City; State; Zip Code San Angelo, TX 76901 | Amount of Contribution (\$) \$25.00 | |
| Principal occupation / Job title (See Instructions) Executive Director | | Employer (See Instructions) San Angelo Early Childhood Center | |
| Date 12/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Cynthia Contributor address; City; State; Zip Code San Angelo, TX 76901 | Amount of Contribution (\$) \$25.00 | |
| Principal occupation / Job title (See Instructions) Executive Director | | Employer (See Instructions) San Angelo Early Childhood Center | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 14/25 Rpt: 17/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 11/26/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Michael | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Lockhart, TX 78644 | |
| 8 Principal occupation / Job title (See Instructions) Account Executive | | 9 Employer (See Instructions) WalkMe |
| Date 07/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Hereford, TX 79045 | |
| Principal occupation / Job title (See Instructions) Associate | | Employer (See Instructions) Laurel Strategies |
| Date 08/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Hereford, TX 79045 | |
| Principal occupation / Job title (See Instructions) Associate | | Employer (See Instructions) Laurel Strategies |
| Date 09/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Hereford, TX 79045 | |
| Principal occupation / Job title (See Instructions) Associate | | Employer (See Instructions) Laurel Strategies |
| Date 10/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Hereford, TX 79045 | |
| Principal occupation / Job title (See Instructions) Associate | | Employer (See Instructions) Laurel Strategies |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 15/25 Rpt: 18/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 11/09/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob 6 Contributor address; City; State; Zip Code Hereford, TX 79045 | 7 Amount of Contribution (\$) \$10.00 |
| | | |
| 8 Principal occupation / Job title (See Instructions) Associate | | 9 Employer (See Instructions) Laurel Strategies |
| Date 12/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Link, Jacob Contributor address; City; State; Zip Code Hereford, TX 79045 | Amount of Contribution (\$) \$10.00 |
| | | |
| Principal occupation / Job title (See Instructions) Associate | | Employer (See Instructions) Laurel Strategies |
| Date 07/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahoney, Tim Contributor address; City; State; Zip Code Austin, TX 78768 | Amount of Contribution (\$) \$3.00 |
| | | |
| Principal occupation / Job title (See Instructions) Lawyer & Com. Planner | | Employer (See Instructions) self |
| Date 08/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahoney, Tim Contributor address; City; State; Zip Code Austin, TX 78768 | Amount of Contribution (\$) \$3.00 |
| | | |
| Principal occupation / Job title (See Instructions) Lawyer & Com. Planner | | Employer (See Instructions) self |
| Date 09/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahoney, Tim Contributor address; City; State; Zip Code Austin, TX 78768 | Amount of Contribution (\$) \$3.00 |
| | | |
| Principal occupation / Job title (See Instructions) Lawyer & Com. Planner | | Employer (See Instructions) self |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 16/25 Rpt: 19/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 10/09/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahoney, Tim | 7 Amount of Contribution (\$) \$3.00 |
| | 6 Contributor address; City; State; Zip Code Austin, TX 78768 | |
| 8 Principal occupation / Job title (See Instructions) Lawyer & Com. Planner | | 9 Employer (See Instructions) self |
| Date 11/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahoney, Tim | Amount of Contribution (\$) \$3.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78768 | |
| Principal occupation / Job title (See Instructions) Lawyer & Com. Planner | | Employer (See Instructions) self |
| Date 12/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahoney, Tim | Amount of Contribution (\$) \$3.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78768 | |
| Principal occupation / Job title (See Instructions) Lawyer & Com. Planner | | Employer (See Instructions) self |
| Date 07/17/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Sheryl | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code New Waverly, TX 77358 | |
| Principal occupation / Job title (See Instructions) Faa | | Employer (See Instructions) Atcs |
| Date 08/17/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Sheryl | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code New Waverly, TX 77358 | |
| Principal occupation / Job title (See Instructions) Faa | | Employer (See Instructions) Atcs |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 17/25 Rpt: 20/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 07/21/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDSON, BRUCE | 7 Amount of Contribution (\$) \$50.00 |
| | 6 Contributor address; City; State; Zip Code Alpine, TX 79830 | |
| 8 Principal occupation / Job title (See Instructions) Analyst | | 9 Employer (See Instructions) Self |
| Date 11/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoonover, Carla | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Palo Pinto, TX 76484 | |
| Principal occupation / Job title (See Instructions) Professional | | Employer (See Instructions) TMI |
| Date 12/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoonover, Carla | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Palo Pinto, TX 76484 | |
| Principal occupation / Job title (See Instructions) Professional | | Employer (See Instructions) TMI |
| Date 07/01/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Saundra | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code San Angelo, TX 76901 | |
| Principal occupation / Job title (See Instructions) Pediatrician | | Employer (See Instructions) Shannon Clinic |
| Date 08/01/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Saundra | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code San Angelo, TX 76901 | |
| Principal occupation / Job title (See Instructions) Pediatrician | | Employer (See Instructions) Shannon Clinic |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 18/25 Rpt: 21/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 09/01/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Saundra | 7 Amount of Contribution (\$) \$10.00 |
| | 6 Contributor address; City; State; Zip Code San Angelo, TX 76901 | |
| 8 Principal occupation / Job title (See Instructions) Pediatrician | | 9 Employer (See Instructions) Shannon Clinic |
| Date 10/01/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Saundra | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code San Angelo, TX 76901 | |
| Principal occupation / Job title (See Instructions) Pediatrician | | Employer (See Instructions) Shannon Clinic |
| Date 11/01/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Saundra | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code San Angelo, TX 76901 | |
| Principal occupation / Job title (See Instructions) Pediatrician | | Employer (See Instructions) Shannon Clinic |
| Date 12/01/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seifert, Saundra | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code San Angelo, TX 76901 | |
| Principal occupation / Job title (See Instructions) Pediatrician | | Employer (See Instructions) Shannon Clinic |
| Date 07/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Guy | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Burnet, TX 78611 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 19/25 Rpt: 22/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 08/08/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Guy 6 Contributor address; City; State; Zip Code Burnet, TX 78611 | 7 Amount of Contribution (\$) \$10.00 |
| | 8 Principal occupation / Job title (See Instructions) Not Employed | 9 Employer (See Instructions) Not Employed |
| Date 09/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Guy Contributor address; City; State; Zip Code Burnet, TX 78611 | Amount of Contribution (\$) \$25.00 |
| | Principal occupation / Job title (See Instructions) Not Employed | Employer (See Instructions) Not Employed |
| Date 09/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Guy Contributor address; City; State; Zip Code Burnet, TX 78611 | Amount of Contribution (\$) \$10.00 |
| | Principal occupation / Job title (See Instructions) Not Employed | Employer (See Instructions) Not Employed |
| Date 10/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Guy Contributor address; City; State; Zip Code Burnet, TX 78611 | Amount of Contribution (\$) \$10.00 |
| | Principal occupation / Job title (See Instructions) Not Employed | Employer (See Instructions) Not Employed |
| Date 11/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Guy Contributor address; City; State; Zip Code Burnet, TX 78611 | Amount of Contribution (\$) \$10.00 |
| | Principal occupation / Job title (See Instructions) Not Employed | Employer (See Instructions) Not Employed |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 20/25 Rpt: 23/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 11/21/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Guy | 7 Amount of Contribution (\$) \$25.00 |
| | 6 Contributor address; City; State; Zip Code Burnet, TX 78611 | |
| 8 Principal occupation / Job title (See Instructions) Not Employed | | 9 Employer (See Instructions) Not Employed |
| Date 12/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Guy | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Burnet, TX 78611 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 07/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Heidi | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Canyon, TX 79015 | |
| Principal occupation / Job title (See Instructions) R.N. And Professor | | Employer (See Instructions) Texas Wesleyan u. |
| Date 08/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Heidi | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Canyon, TX 79015 | |
| Principal occupation / Job title (See Instructions) R.N. And Professor | | Employer (See Instructions) Texas Wesleyan u. |
| Date 09/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Heidi | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Canyon, TX 79015 | |
| Principal occupation / Job title (See Instructions) R.N. And Professor | | Employer (See Instructions) Texas Wesleyan u. |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 21/25 Rpt: 24/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 10/16/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Heidi 6 Contributor address; City; State; Zip Code Canyon, TX 79015 | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) R.N. And Professor | | 9 Employer (See Instructions) Texas Wesleyan u. |
| Date 11/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Heidi Contributor address; City; State; Zip Code Canyon, TX 79015 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) R.N. And Professor | | Employer (See Instructions) Texas Wesleyan u. |
| Date 12/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Heidi Contributor address; City; State; Zip Code Canyon, TX 79015 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) R.N. And Professor | | Employer (See Instructions) Texas Wesleyan u. |
| Date 07/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann Contributor address; City; State; Zip Code Dubin, TX 76446 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) artist and writer | | Employer (See Instructions) self |
| Date 08/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann Contributor address; City; State; Zip Code Dubin, TX 76446 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) artist and writer | | Employer (See Instructions) self |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 22/25 Rpt: 25/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 09/16/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann | 7 Amount of Contribution (\$) \$25.00 |
| | 6 Contributor address; City; State; Zip Code Dubin, TX 76446 | |
| 8 Principal occupation / Job title (See Instructions) artist and writer | | 9 Employer (See Instructions) self |
| Date 10/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Dubin, TX 76446 | |
| Principal occupation / Job title (See Instructions) artist and writer | | Employer (See Instructions) self |
| Date 11/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Dubin, TX 76446 | |
| Principal occupation / Job title (See Instructions) artist and writer | | Employer (See Instructions) self |
| Date 12/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Suzann | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Dubin, TX 76446 | |
| Principal occupation / Job title (See Instructions) artist and writer | | Employer (See Instructions) self |
| Date 07/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert | Amount of Contribution (\$) \$15.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78723 | |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) Microsoft |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 23/25 Rpt: 26/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 08/14/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert | 7 Amount of Contribution (\$) \$15.00 |
| | 6 Contributor address; City; State; Zip Code Austin, TX 78723 | |
| 8 Principal occupation / Job title (See Instructions) Software Engineer | | 9 Employer (See Instructions) Microsoft |
| Date 09/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert | Amount of Contribution (\$) \$15.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78723 | |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) Microsoft |
| Date 10/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert | Amount of Contribution (\$) \$15.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78723 | |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) Microsoft |
| Date 11/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert | Amount of Contribution (\$) \$15.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78723 | |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) Microsoft |
| Date 12/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turknett, Robert | Amount of Contribution (\$) \$15.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78723 | |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) Microsoft |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 24/25 Rpt: 27/46 |
| 2 FILER NAME The 134 Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 11/27/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westmoreland, William 6 Contributor address; City; State; Zip Code Osceola, MO 64776 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) CEO | | 9 Employer (See Instructions) Highlander Political Strategies LLC |
| Date 07/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yarbrough, Michael Contributor address; City; State; Zip Code Brooklyn, NY 11217 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) John Jay College of Criminal Justice |
| Date 08/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yarbrough, Michael Contributor address; City; State; Zip Code Brooklyn, NY 11217 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) John Jay College of Criminal Justice |
| Date 09/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yarbrough, Michael Contributor address; City; State; Zip Code Brooklyn, NY 11217 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) John Jay College of Criminal Justice |
| Date 10/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yarbrough, Michael Contributor address; City; State; Zip Code Brooklyn, NY 11217 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) John Jay College of Criminal Justice |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | | |
|---|---|---|--|
| The Instruction Guide explains how to complete this form. | | | 1 Total pages Schedule A1: Sch: 25/25 Rpt: 28/46 |
| 2 FILER NAME The 134 Political Action Committee | | | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 11/10/2025 | 5 Full name of contributor Yarbrough, Michael | 6 Contributor address; City; State; Zip Code Brooklyn, NY 11217 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) Professor | | 9 Employer (See Instructions) John Jay College of Criminal Justice | |
| Date 12/10/2025 | Full name of contributor Yarbrough, Michael | □ out-of-state PAC (ID#): Contributor address; City; State; Zip Code Brooklyn, NY 11217 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Professor | | Employer (See Instructions) John Jay College of Criminal Justice | |

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: 1/18 Rpt: 29/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 12/22/2025 | 5 Payee name Amazon | |
| 6 Amount (\$) \$285.09 | 7 Payee address; City; State; Zip Code 410 Terry Ave North Seattle , WA 98109 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Printing 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 Print materials for meeting |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 08/27/2025 | Payee name Brazoria County Democratic Club | |
| Amount (\$) \$200.00 | Payee address; City; State; Zip Code PO Box 108 Angleton , TX 77515 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Printing 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 Print expenses for advertising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/02/2025 | Payee name Double Tree | |
| Amount (\$) \$447.00 | Payee address; City; State; Zip Code 303 W 15TH STREET Austin , TX 78701 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Event 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 Room Rental- Meeting |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 2/18 Rpt: 30/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 07/15/2025 | 5 Payee name First Financial Bank | |
| 6 Amount (\$) \$27.00 | 7 Payee address; City; 400 Pine Street Abliene, TX 79601 | |
| 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 Banking Account Maintenance Fee |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 08/15/2025 | Payee name First Financial Bank | |
| Amount (\$) \$25.00 | Payee address; City; 400 Pine Street Abliene, TX 79601 | |
| 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 Bank Account Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/15/2025 | Payee name First Financial Bank | |
| Amount (\$) \$25.00 | Payee address; City; 400 Pine Street Abliene, TX 79601 | |
| 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 Bank Account Management |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 3/18 Rpt: 31/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 10/15/2025 | 5 Payee name First Financial Bank | |
| 6 Amount (\$) \$25.00 | 7 Payee address; City; 400 Pine Street Abliene, TX 79601 | |
| 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 Bank Acct Management |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Date 11/17/2025 | Payee name First Financial Bank | |
| Amount (\$) \$25.00 | Payee address; City; 400 Pine Street Abliene, TX 79601 | |
| 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 Bank Account Management |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Date 12/15/2025 | Payee name First Financial Bank | |
| Amount (\$) \$25.00 | Payee address; City; 400 Pine Street Abliene, TX 79601 | |
| 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 Monthly Bank Management |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 4/18 Rpt: 32/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 07/02/2025 | 5 Payee name Google | |
| 6 Amount (\$) \$53.73 | 7 Payee address; City; State; Zip Code 1600 Ampitheatre Parkway Mountain View, CA 94043 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Google Storage |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 08/04/2025 | Payee name Google | |
| Amount (\$) \$60.36 | Payee address; City; State; Zip Code 1600 Ampitheatre Parkway Mountain View, CA 94043 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Storage acct-google |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/02/2025 | Payee name Google | |
| Amount (\$) \$62.68 | Payee address; City; State; Zip Code 1600 Ampitheatre Parkway Mountain View, CA 94043 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace, storage |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 5/18 Rpt: 33/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 10/02/2025 | 5 Payee name Google | |
| 6 Amount (\$) \$62.68 | 7 Payee address; City; State; Zip Code 1600 Ampitheatre Parkway Mountain View, CA 94043 | |
| 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 Storage online management |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/03/2025 | Payee name Google | |
| Amount (\$) \$62.68 | Payee address; City; State; Zip Code 1600 Ampitheatre Parkway Mountain View, CA 94043 | |
| 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 Storage online |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/02/2025 | Payee name Google | |
| Amount (\$) \$62.68 | Payee address; City; State; Zip Code 1600 Ampitheatre Parkway Mountain View, CA 94043 | |
| 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 Monthly Storage |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 6/18 Rpt: 34/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 07/14/2025 | 5 Payee name Later.com | |
| 6 Amount (\$) \$42.67 | 7 Payee address; City; 88 E Pender Street Vancouver Canada | |
| 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 Social Media management and scheduling platform |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Date 08/15/2025 | Payee name Later.com | Office held |
| Amount (\$) \$42.64 | Payee address; City; 88 E Pender Street Vancouver Canada | |
| 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 Social Media Management platform |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Date 09/15/2025 | Payee name Later.com | Office held |
| Amount (\$) \$42.64 | Payee address; City; 88 E Pender Street Vancouver Canada | |
| 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 Social Media Management Platform |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 7/18 Rpt: 35/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 10/15/2025 | 5 Payee name Later.com | |
| 6 Amount (\$) \$42.64 | 7 Payee address; City; 88 E Pender Street Vancouver Canada | |
| 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 Social Media Management Platform |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Date 11/17/2025 | Payee name Later.com | |
| Amount (\$) \$42.64 | Payee address; City; 88 E Pender Street Vancouver Canada | |
| 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 Social Media Management Platform |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Date 12/15/2025 | Payee name Later.com | |
| Amount (\$) \$42.62 | Payee address; City; 88 E Pender Street Vancouver Canada | |
| 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 Social Media Management Platform |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 8/18 Rpt: 36/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 09/15/2025 | 5 Payee name Office Depot | |
| 6 Amount (\$) \$51.96 | 7 Payee address; City; State; Zip Code 907 W 5TH ST #101 AUSTIN, TX 78703 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing 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 Materials for meeting |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 07/07/2025 | Payee name Otter | |
| Amount (\$) \$95.94 | Payee address; City; State; Zip Code 800 W El Camino Real, Suite 17 Mountain View , CA 94040 | |
| 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 Administrative, meeting notes services |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 08/07/2025 | Payee name Otter | |
| Amount (\$) \$95.94 | Payee address; City; State; Zip Code 800 W El Camino Real, Suite 17 Mountain View , CA 94040 | |
| 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 Meeting Management -Notes, |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 9/18 Rpt: 37/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 09/04/2025 | 5 Payee name Otter | |
| 6 Amount (\$) \$3.13 | 7 Payee address; City; State; Zip Code 800 W El Camino Real, Suite 17 Mountain View , CA 94040 | |
| 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 Notes management-meetings |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/07/2025 | Payee name Otter | |
| Amount (\$) \$95.94 | Payee address; City; State; Zip Code 800 W El Camino Real, Suite 17 Mountain View , CA 94040 | |
| 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 Meeting documentation management |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/07/2025 | Payee name Otter | |
| Amount (\$) \$95.94 | Payee address; City; State; Zip Code 800 W El Camino Real, Suite 17 Mountain View , CA 94040 | |
| 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 Meeting Note Management |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 10/18 Rpt: 38/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 12/07/2025 | 5 Payee name Otter | |
| 6 Amount (\$) \$95.94 | 7 Payee address; City; State; Zip Code 800 W El Camino Real, Suite 17 Mountain View , CA 94040 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Meeting Note Management |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 07/14/2025 | Payee name Slack | |
| Amount (\$) \$9.33 | Payee address; City; State; Zip Code 415 Mission Street San Fransico , CA 94105 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Communication platform for teams |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 08/12/2025 | Payee name Slack | |
| Amount (\$) \$9.33 | Payee address; City; State; Zip Code 415 Mission Street San Fransico , CA 94105 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Group Communication platform |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 11/18 Rpt: 39/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 09/12/2025 | 5 Payee name Slack | |
| 6 Amount (\$) \$9.33 | 7 Payee address; City; State; Zip Code 415 Mission Street San Fransico , CA 94105 | |
| 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 communication platform |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/14/2025 | Payee name Slack | |
| Amount (\$) \$9.33 | Payee address; City; State; Zip Code 415 Mission Street San Fransico , CA 94105 | |
| 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 Communication Management Platform |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/12/2025 | Payee name Slack | |
| Amount (\$) \$9.33 | Payee address; City; State; Zip Code 415 Mission Street San Fransico , CA 94105 | |
| 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 Communication Platform for teams |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 12/18 Rpt: 40/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 12/12/2025 | 5 Payee name Slack | |
| 6 Amount (\$) \$9.33 | 7 Payee address; City; State; Zip Code 415 Mission Street San Fransico , CA 94105 | |
| 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 Communication Platform |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 08/27/2025 | Payee name United States Postal Service | |
| Amount (\$) \$133.00 | Payee address; City; State; Zip Code 200 SW 1st Ave Mineral Wells , TX 76068 | |
| 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 PO BOX MAIL FEE |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 07/28/2025 | Payee name Zoom | |
| Amount (\$) \$18.11 | Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113 | |
| 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 Video Communication platform-meetings |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 13/18 Rpt: 41/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 08/27/2025 | 5 Payee name Zoom | |
| 6 Amount (\$) \$18.11 | 7 Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113 | |
| 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 Video Communication-Meeting |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/30/2025 | Payee name Zoom | |
| Amount (\$) \$18.11 | Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113 | |
| 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 Video Meeting Management |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/21/2025 | Payee name Zoom | |
| Amount (\$) \$18.11 | Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113 | |
| 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 Video Communication Meeting |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 14/18 Rpt: 42/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 11/28/2025 | 5 Payee name Zoom | |
| 6 Amount (\$) \$18.11 | 7 Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113 | |
| 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 Video Management Meetings |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/29/2025 | Payee name Zoom | |
| Amount (\$) \$18.11 | Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113 | |
| 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 Video Communication Meetings |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 08/27/2025 | Payee name iPay | |
| Amount (\$) \$4.95 | Payee address; City; State; Zip Code 918 Abner Waycross, GA 31501 | |
| 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 online payment platform |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 15/18 Rpt: 43/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 10/31/2025 | 5 Payee name iPay | |
| 6 Amount (\$) \$4.95 | 7 Payee address; City; State; Zip Code 918 Abner Waycross, GA 31501 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online bill pay management |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/28/2025 | Payee name iPay | |
| Amount (\$) \$4.95 | Payee address; City; State; Zip Code 918 Abner Waycross, GA 31501 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Bill pay |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/29/2025 | Payee name iPay | |
| Amount (\$) \$4.95 | Payee address; City; State; Zip Code 918 Abner Waycross, GA 31501 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Bill Payment |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 16/18 Rpt: 44/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 07/28/2025 | 5 Payee name wix.com | |
| 6 Amount (\$) \$31.39 | 7 Payee address; City; State; Zip Code 500 Tery A Francois Blvd San Fransciso , CA 94158 | |
| 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 Website hosting platform fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 08/26/2025 | Payee name wix.com | |
| Amount (\$) \$31.39 | Payee address; City; State; Zip Code 500 Tery A Francois Blvd San Fransciso , CA 94158 | |
| 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 Website hosting platform |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/04/2025 | Payee name wix.com | |
| Amount (\$) \$675.48 | Payee address; City; State; Zip Code 500 Tery A Francois Blvd San Fransciso , CA 94158 | |
| 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 Annual Fee host website and associated services |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 17/18 Rpt: 45/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 |
| 4 Date 09/15/2025 | 5 Payee name wix.com | |
| 6 Amount (\$) \$31.39 | 7 Payee address; City; State; Zip Code 500 Tery A Francois Blvd San Fransciso , CA 94158 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Website management |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/27/2025 | Payee name wix.com | |
| Amount (\$) \$31.39 | Payee address; City; State; Zip Code 500 Tery A Francois Blvd San Fransciso , CA 94158 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Monthly Maintenance |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/26/2025 | Payee name wix.com | |
| Amount (\$) \$31.39 | Payee address; City; State; Zip Code 500 Tery A Francois Blvd San Fransciso , CA 94158 | |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Monthly Management |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | | |
|---|--|--|-------------|
| 1 Total pages Schedule F1: Sch: 18/18 Rpt: 46/46 | 2 FILER NAME The 134 Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00085309 | |
| 4 Date 12/26/2025 | 5 Payee name wix.com | | |
| 6 Amount (\$) \$31.39 | 7 Payee address; City; State; Zip Code 500 Tery A Francois Blvd San Fransciso , CA 94158 | | |
| 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 Monthly Bank Management | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |