

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) 00031890	2 Total pages filed: 14
3 COMMITTEE NAME Private Providers Association of Texas Political Action Committee			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/14/2026 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 8711 Burnet Road, E53 Austin, TX 78757		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Carole L. NICKNAME LAST SUFFIX Smith		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 8711 Burnet Road, E53 Austin, TX 78757		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 8711 Burnet Rd. #E53 Austin, TX 78757		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 452-8188		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year 07/01/2025 THROUGH Month Day Year 12/31/2025		
11 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Private Providers Association of Texas Political Action Committee	13 Filer ID (Ethics Commission Filers) 00031890
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 12,168.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 6,786.92
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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

Ms. Carole L. Smith

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 14

17 COMMITTEE NAME Private Providers Association of Texas Political Action Committee		18 Filer ID (Ethics Commission Filers) 00031890
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,755.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 8,413.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 205.00
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	\$ 2,500.00
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input 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: 1/3 Rpt: 4/14
2 FILER NAME Private Providers Association of Texas Political Action Committee		3 Filer ID (Ethics Commission Filers) 00031890
4 Date 09/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Branch, James (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Lufkin, TX 75915	7 Amount of Contribution (\$) \$55.00
8 Principal occupation / Job title (See Instructions) owner		9 Employer (See Instructions) Innovative Homes Deep East Texas
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Shelly (Mrs.) <hr/> Contributor address; City; State; Zip Code Aubrey, TX 76227	Amount of Contribution (\$) \$1,250.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Avid Quality Care
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gould, Dave (Mr.) <hr/> Contributor address; City; State; Zip Code Liberty Hill, TX 78692	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Hope House
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Teresa (Ms.) <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78250	Amount of Contribution (\$) \$160.00
Principal occupation / Job title (See Instructions) Program Director		Employer (See Instructions) Regency Community Services
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunter, Melissa (Ms.) <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77354	Amount of Contribution (\$) \$220.00
Principal occupation / Job title (See Instructions) Case Manager		Employer (See Instructions) Supporting Families First

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/14
2 FILER NAME Private Providers Association of Texas Political Action Committee		3 Filer ID (Ethics Commission Filers) 00031890
4 Date 09/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pecot, Clayton (Mr.) 6 Contributor address; City; State; Zip Code Longview, TX 75604	7 Amount of Contribution (\$) \$380.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Harmony Living Centers, Inc.
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Bernadette (Mrs.) Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$160.00
Principal occupation / Job title (See Instructions) VP of Operations		Employer (See Instructions) Kenmar Residential Services
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russo, Brittney (Mrs.) Contributor address; City; State; Zip Code Sugar Land, TX 77498	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) CORE-VA Solutions, Inc.
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shannon, Jay (Mr.) Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$585.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Trinity Manor
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taft, Susan (Mrs.) Contributor address; City; State; Zip Code Corpus Christi, TX 78427	Amount of Contribution (\$) \$560.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Tejas Management Services, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 3/3 Rpt: 6/14

2 FILER NAME

Private Providers Association of Texas Political Action Committee

3 Filer ID (Ethics Commission Filers)
00031890

4 Date
09/25/2025

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Velasquez, Lilia (Ms.)

7 Amount of Contribution (\$)
\$165.00

6 Contributor address; City; State; Zip Code

Rowlett, TX 75088

8 Principal occupation / Job title (See Instructions)
Program Manager

9 Employer (See Instructions)
Berry Family Services

Date
09/25/2025

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Wilson, Stacy (Ms.)

Amount of Contribution (\$)
\$75.00

Contributor address; City; State; Zip Code

Independence, MO 64056

Principal occupation / Job title (See Instructions)
Business Development Director

Employer (See Instructions)
Neighborhood LTC Pharmacy

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 1/6 Rpt: 7/14	
2 FILER NAME Private Providers Association of Texas Political Action Committee				3 Filer ID (Ethics Commission Filers) 00031890	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 09/24/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armond, Daniel (Mr.)		8 Amount of contribution (\$) \$60.00		9 In-kind contribution description Paris/Manhattan portraits
7 Contributor address; City; State; Zip Code Pearland, TX 77581			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) CEO			11 Employer (FOR NON-JUDICIAL) (See instructions) Golden Rule Services, Inc.		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Jason (Mr.)		Amount of contribution (\$) \$300.00		In-kind contribution description Kitchen mixer
Contributor address; City; State; Zip Code Rowlett, TX 75089			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) CEO			Employer (FOR NON-JUDICIAL) (See instructions) Berry Family Services		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Lauren (Ms.)		Amount of contribution (\$) \$60.00		In-kind contribution description Texas Flag plate
Contributor address; City; State; Zip Code Cypress, TX 77429			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Executive Director			Employer (FOR NON-JUDICIAL) (See instructions) Reach Unlimited		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 2/6 Rpt: 8/14	
2 FILER NAME Private Providers Association of Texas Political Action Committee				3 Filer ID (Ethics Commission Filers) 00031890	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 09/24/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blacklock, Julie (Mrs.)		8 Amount of contribution (\$) \$300.00		9 In-kind contribution description One Twogether Consulting certificate
7 Contributor address; City; State; Zip Code Austin, TX 78745		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Owner			11 Employer (FOR NON-JUDICIAL) (See instructions) Twogether Consulting		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Lenne (Ms.)		Amount of contribution (\$) \$399.00		In-kind contribution description skylight electronic calendar
Contributor address; City; State; Zip Code Richmond, TX 77407		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Program Director			Employer (FOR NON-JUDICIAL) (See instructions) Supporting Families First		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dietrich, Denise (Ms.)		Amount of contribution (\$) \$300.00		In-kind contribution description Gift basket
Contributor address; City; State; Zip Code Spring, TX 77379		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Program Manager			Employer (FOR NON-JUDICIAL) (See instructions) Pride HCS		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 3/6 Rpt: 9/14	
2 FILER NAME Private Providers Association of Texas Political Action Committee		3 Filer ID (Ethics Commission Filers) 00031890	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 09/24/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Eric (Mr.)	8 Amount of contribution (\$) \$100.00	9 In-kind contribution description JBL speaker
	7 Contributor address; City; State; Zip Code Tuscola, TX 79562	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Pharmacy consultant		11 Employer (FOR NON-JUDICIAL) (See instructions) Neighborhood LTC Pharmacy	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves, Sandra (Ms.)	Amount of contribution (\$) \$930.00	In-kind contribution description 4 tickets to Texans v Raiders football game
	Contributor address; City; State; Zip Code Alvin, TX 77511		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) CEO		Employer (FOR NON-JUDICIAL) (See instructions) All The Little Things Count	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Barry (Mr.)	Amount of contribution (\$) \$420.00	In-kind contribution description set of 4 customized tumblers
	Contributor address; City; State; Zip Code Elgin, TX 78621		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) VP of Operations		Employer (FOR NON-JUDICIAL) (See instructions) Down Home Ranch	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 4/6 Rpt: 10/14	
2 FILER NAME Private Providers Association of Texas Political Action Committee				3 Filer ID (Ethics Commission Filers) 00031890	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 09/24/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalnas, Norma (Ms.) <hr style="border-top: 1px dotted black;"/> 7 Contributor address; City; State; Zip Code El Paso, TX 79936	8 Amount of contribution (\$) \$265.00	9 In-kind contribution description Austin City Gift basket		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) VP/CFO			11 Employer (FOR NON-JUDICIAL) (See instructions) Caring Matters		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Pamela (Ms.) <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code Spring Branch, TX 78070	Amount of contribution (\$) \$1,000.00	In-kind contribution description One Nursing Innovations services certificate		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Owner			Employer (FOR NON-JUDICIAL) (See instructions) Nursing Innovations		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parnham, Brad (Mr.) <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of contribution (\$) \$45.00	In-kind contribution description man's travel bag		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Business Manager			Employer (FOR NON-JUDICIAL) (See instructions) Kenmar Residential Services		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 5/6 Rpt: 11/14	
2 FILER NAME Private Providers Association of Texas Political Action Committee				3 Filer ID (Ethics Commission Filers) 00031890	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 09/24/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pecot, Clayton (Mr.)		8 Amount of contribution (\$) \$596.00		9 In-kind contribution description Two Michael Kors handbags
7 Contributor address; City; State; Zip Code Longview, TX 75604		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) President			11 Employer (FOR NON-JUDICIAL) (See instructions) Harmony Living Centers, Inc.		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Carole (Ms.)		Amount of contribution (\$) \$299.00		In-kind contribution description Kate Spade crossbody purse
Contributor address; City; State; Zip Code Leander, TX 78641		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Executive Director			Employer (FOR NON-JUDICIAL) (See instructions) Private Providers Association of Texas		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Joanalys (Mrs.)		Amount of contribution (\$) \$1,000.00		In-kind contribution description Two 3 hour legal services certificate
Contributor address; City; State; Zip Code Austin, TX 78734		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney at Law			Employer (FOR NON-JUDICIAL) (See instructions) Smith & Associates		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 6/6 Rpt: 12/14	
2 FILER NAME Private Providers Association of Texas Political Action Committee				3 Filer ID (Ethics Commission Filers) 00031890	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 09/24/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Jerri (Ms.)		8 Amount of contribution (\$) \$1,890.00		9 In-kind contribution description Two 3 hour legal consultation services certificates
7 Contributor address; City; State; Zip Code College Station, TX 77840		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney at Law			11 Employer (FOR NON-JUDICIAL) (See instructions) Garlo Ward, PC		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winbush, Saprina (Ms.)		Amount of contribution (\$) \$80.00		In-kind contribution description Innoview Portable Monitor
Contributor address; City; State; Zip Code Dallas, TX 75241		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Program Director			Employer (FOR NON-JUDICIAL) (See instructions) IMIAH, LLC		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Wendy (Ms.)		Amount of contribution (\$) \$369.00		In-kind contribution description Kate Spade backpack
Contributor address; City; State; Zip Code Grand Prairie, TX 75052		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) President			Employer (FOR NON-JUDICIAL) (See instructions) AIM High HCS, Inc.		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 13/14

2 FILER NAME

Private Providers Association of Texas Political Action Committee

3 Filer ID (Ethics Commission Filers)
00031890

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

09/25/2025

6 Full name of pledgor
Enriquez, Ruddy (Mr.)

☐ out-of-state PAC (ID#: _____)

7 Pledgor Address; City; State; Zip Code

Dallas, TX 75235

8 Amount of
pledge (\$)

\$175.00

9 In-kind description
(If applicable)

contribution to PPAT
PAC

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

CEO

11 Employer (See Instructions)

iCare Services

5 Date

09/25/2025

6 Full name of pledgor
Hopkins, Rachel (Ms.)

☐ out-of-state PAC (ID#: _____)

7 Pledgor Address; City; State; Zip Code

Bedford, TX 76201

8 Amount of
pledge (\$)

\$30.00

9 In-kind description
(If applicable)

\$30.00 contribution to
the PPAT PAC

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

Director Healthcare Services

11 Employer (See Instructions)

Molina Healthcare Tx

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 14/14	2 FILER NAME Private Providers Association of Texas Political Action	3 Filer ID (Ethics Commission Filers) 00031890
4 Date 12/17/2025	5 Payee name Davila, Caroline (Rep.)	
6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 700 Round Rock, TX 78680	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense \$500 political contribution from the PPAT PAC to Representative Caroline Harris Davila
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2025	Payee name Kitzman, Stan (Rep.)	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 553 Pattison, TX 77466	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense \$1,000 political contribution from the PPAT PAC to Representative Stan Kitman
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/17/2025	Payee name Oliverson M.D., Tom (Rep.)	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1 Greenway Plaza #225 Houston, TX 77046	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense \$1000 political contribution from the PPAT PAC to Rep Tom Oliverson, M.D.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held