

**JUDICIAL CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM JC/OH
COVER SHEET PG 1**

The JC/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers) 00065765	2 Total pages filed: 24		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Karen R.	MI	OFFICE USE ONLY		
	NICKNAME	LAST Sage	SUFFIX	Date Received ELECTRONICALLY FILED 01/15/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE			Date Hand-delivered or Date Postmarked		
	REDACTED PER 254.0313, GOVT CODE			Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Brian	MI			
	NICKNAME	LAST Roark	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE
	REDACTED PER 254.0313, GOVT CODE					
7 CAMPAIGN TREASURER PHONE	AREA CODE (512)	PHONE NUMBER 476-1900	EXTENSION			
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded modified reporting limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026			ELECTION TYPE		
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	<input type="checkbox"/> General	<input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) District Judge District 299 Travis			12 OFFICE SOUGHT (if known) District Judge District 299		

GO TO PAGE 2

**JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM JC/OH
COVER SHEET PG 2**

2 of 24

13 C / OH NAME	Sage, Karen R. (The Honorable)		14 Filer ID (Ethics Commission Filers) 00065765												
15 NOTICE FROM POLITICAL COMMITTEE(S)	<p>This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.</p> <table border="1"> <tr> <td><input type="checkbox"/> Additional Pages</td> <td>COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td></td> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS		<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			COMMITTEE CAMPAIGN TREASURER ADDRESS
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME													
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS													
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME													
		COMMITTEE CAMPAIGN TREASURER ADDRESS													
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00												
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 37,336.18												
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00												
	4. TOTAL POLITICAL EXPENDITURES		\$ 9,082.89												
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 30,745.44												
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00												
17 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>The Honorable Karen R. Sage _____ Signature of Candidate or Officeholder</p>															
AFFIX NOTARY STAMP / SEAL ABOVE															
<p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p>															
Signature of officer administering oath		Printed name of officer administering oath													
		Title of officer administering oath													

SUBTOTALS - JC/OH**FORM JC/OH
COVER SHEET PG 3**

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18 FILER NAME Sage, Karen R. (The Honorable)	19 Filer ID (Ethics Commission Filers) 00065765
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A(J): MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ 37,336.18	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$	
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$	
4. <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) \$	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 9,082.89	
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$	
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$	
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/14 Rpt: 4/24
2 FILER NAME Sage, Karen R. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065765
4 Date 09/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthes, Meril	7 Amount of Contribution (\$) \$1,052.95
	6 Contributor address; City; State; Zip Code Austin, TX 78701	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Managing partner
10 Contributor's employer/law firm Gunter Bennett Anthes		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, Sara	Amount of Contribution (\$) \$105.58
	Contributor address; City; State; Zip Code Austin, TX 78731	
Contributor's Principal Occupation Physician		Contributor's Job Title Neurologist
Contributor's employer/law firm Ascension Medical Group		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAIRD LAW FIRM, PLLC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code AUSTIN, TX 78748	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/14 Rpt: 5/24
2 FILER NAME Sage, Karen R. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065765
4 Date 10/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bassett, Samuel 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$526.63
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title Partner
10 Contributor's employer/law firm Minton, Bassett, Flores & Carsey		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/14/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolin, James Contributor address; City; State; Zip Code Charlotte, NC 28207		
Amount of Contribution (\$) \$500.00		
Contributor's Principal Occupation retired		
Contributor's Job Title retired		
Contributor's employer/law firm retired		
Law firm of contributor's spouse (if any)		
If contributor is a child, law firm of parent(s) (if any)		
Date 10/16/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bondy, Karen Contributor address; City; State; Zip Code Austin, TX 78731		
Amount of Contribution (\$) \$263.47		
Contributor's Principal Occupation Engineer		
Contributor's Job Title Retired		
Contributor's employer/law firm Retired		
Law firm of contributor's spouse (if any)		
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/14 Rpt: 6/24
2 FILER NAME Sage, Karen R. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065765
4 Date 10/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bope, Flannery 6 Contributor address; City; State; Zip Code Austin, TX 78745	7 Amount of Contribution (\$) \$52.95
8 Contributor's Principal Occupation Marketing		9 Contributor's Job Title Sr digital marketing manager
10 Contributor's employer/law firm Concierge Auctions		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/13/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, David Contributor address; City; State; Zip Code Austin, TX 78701		Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Chambers & Associates		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/14/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cofer, Richard Contributor address; City; State; Zip Code Austin, TX 78701		Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title Partner
Contributor's employer/law firm Cofer & Connelly, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/14 Rpt: 7/24
2 FILER NAME Sage, Karen R. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065765
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEBEAUVOIR, DANA L	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code AUSTIN, TX 78731-6508	
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title None
10 Contributor's employer/law firm None		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/13/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Darla
		Contributor address; City; State; Zip Code Austin, TX 78701
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/16/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De La Vina, John
		Contributor address; City; State; Zip Code Austin, TX 78701
Contributor's Principal Occupation attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/14 Rpt: 8/24
2 FILER NAME Sage, Karen R. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065765
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drymalla, Laurie and Chris 6 Contributor address; City; State; Zip Code Austin, TX 78735	7 Amount of Contribution (\$) \$105.58
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/18/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRANGER AND MUELLER, P.C. Contributor address; City; State; Zip Code AUSTIN, TX 78701		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/18/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gergen, Benjamin Contributor address; City; State; Zip Code Austin, TX 78701		Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Gergen, Hale, and Campbell		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/14 Rpt: 9/24
2 FILER NAME Sage, Karen R. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065765
4 Date 09/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gergen, Benjamin 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$2,500.00
	8 Contributor's Principal Occupation Lawyer	
9 Contributor's Job Title Lawyer		
10 Contributor's employer/law firm Gergen, Hale, and Campbell Law		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/13/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamre, Dan Contributor address; City; State; Zip Code Austin, TX 78723		Amount of Contribution (\$) \$263.47
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Hamre Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/13/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heilman, Brad Contributor address; City; State; Zip Code Austin, TX 78746		Amount of Contribution (\$) \$1,052.95
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner
Contributor's employer/law firm Heilman Law, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/14 Rpt: 10/24
2 FILER NAME Sage, Karen R. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065765
4 Date 10/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hines & Holub 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/11/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoyer, Shirley Contributor address; City; State; Zip Code Austin, TX 78733		Amount of Contribution (\$) \$105.58
Contributor's Principal Occupation Art		Contributor's Job Title Volunteer
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/22/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loewy, Adam Contributor address; City; State; Zip Code Austin, TX 78731		Amount of Contribution (\$) \$2,500.00
Contributor's Principal Occupation Law		Contributor's Job Title Boss
Contributor's employer/law firm Loewy Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/14 Rpt: 11/24
2 FILER NAME Sage, Karen R. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065765
4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Machado, Albert	7 Amount of Contribution (\$) \$263.47
	6 Contributor address; City; State; Zip Code Austin, TX 78701	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael, Benjamin	Amount of Contribution (\$) \$1,579.26
	Contributor address; City; State; Zip Code Austin, TX 78704	
Contributor's Principal Occupation Lawyer		Contributor's Job Title Owner
Contributor's employer/law firm Michael & Associates		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minton, Bassett, Flores & Carsey, P.C.	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/14 Rpt: 12/24	
2 FILER NAME Sage, Karen R. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065765	
4 Date 10/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Novert 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of Contribution (\$) \$250.00	
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title owner	
10 Contributor's employer/law firm Morales Law Office		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 10/12/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Tracey Contributor address; City; State; Zip Code Austin, TX 78701-4527	Amount of Contribution (\$) \$263.47
Contributor's Principal Occupation Executive Coach		Contributor's Job Title Senior Executive Leadership Coach	
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 09/22/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Connell, Doug Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,631.89
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney	
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/14 Rpt: 13/24
2 FILER NAME Sage, Karen R. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065765
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petersen, Wendy 6 Contributor address; City; State; Zip Code Austin, TX 78737	7 Amount of Contribution (\$) \$26.63
8 Contributor's Principal Occupation N/a		9 Contributor's Job Title N/a
10 Contributor's employer/law firm N/a		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/22/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Popper, Charles and lisa Contributor address; City; State; Zip Code Austin, TX 78701		Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Law office		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/16/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, George Contributor address; City; State; Zip Code Austin, TX 78745		Amount of Contribution (\$) \$105.58
Contributor's Principal Occupation Education		Contributor's Job Title Teacher
Contributor's employer/law firm Hays CISD		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/14 Rpt: 14/24
2 FILER NAME Sage, Karen R. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065765
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Eric 6 Contributor address; City; State; Zip Code Los Angeles, CA 90077	7 Amount of Contribution (\$) \$105.58
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title Partner
10 Contributor's employer/law firm O'Melveny & Myers LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/15/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roadman, Charlie Contributor address; City; State; Zip Code Austin, TX 78739		Amount of Contribution (\$) \$526.63
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/16/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sampson, Mark Contributor address; City; State; Zip Code Austin, TX 78704		Amount of Contribution (\$) \$263.47
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Law Office of Mark Sampson		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/14 Rpt: 15/24
2 FILER NAME Sage, Karen R. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065765
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THE HULL FIRM 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$2,500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THE LAW OFFICE OF SANDRA C RITZ Contributor address; City; State; Zip Code AUSTIN, TX 78701		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/15/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THE LAW OFFICES OF BRIAN ROARK, P.C. Contributor address; City; State; Zip Code AUSTIN, TX 78701		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 13/14 Rpt: 16/24												
2 FILER NAME Sage, Karen R. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065765												
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAZQUEZ LAW FIRM PLLC 6 Contributor address; City; State; Zip Code AUSTIN, TX 78701	7 Amount of Contribution (\$) \$2,500.00												
8 Contributor's Principal Occupation		9 Contributor's Job Title												
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)												
12 If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 09/22/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vela, Jorge Contributor address; City; State; Zip Code Austin, TX 78704</td> <td>Amount of Contribution (\$) \$2,631.89</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation Lawyer</td> <td>Contributor's Job Title Owner</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm Law office of Jorge vela</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vela, Jorge Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$2,631.89	Contributor's Principal Occupation Lawyer		Contributor's Job Title Owner	Contributor's employer/law firm Law office of Jorge vela		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vela, Jorge Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$2,631.89												
Contributor's Principal Occupation Lawyer		Contributor's Job Title Owner												
Contributor's employer/law firm Law office of Jorge vela		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 10/14/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAHLBERG, P DAVID Contributor address; City; State; Zip Code AUSTIN, TX 78731</td> <td>Amount of Contribution (\$) \$100.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation District Judge</td> <td>Contributor's Job Title District Judge</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm State of Texas</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAHLBERG, P DAVID Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00	Contributor's Principal Occupation District Judge		Contributor's Job Title District Judge	Contributor's employer/law firm State of Texas		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAHLBERG, P DAVID Contributor address; City; State; Zip Code AUSTIN, TX 78731	Amount of Contribution (\$) \$100.00												
Contributor's Principal Occupation District Judge		Contributor's Job Title District Judge												
Contributor's employer/law firm State of Texas		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 14/14 Rpt: 17/24
2 FILER NAME Sage, Karen R. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065765
4 Date 09/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wick, Jim 6 Contributor address; City; State; Zip Code Austin, TX 78747	7 Amount of Contribution (\$) \$5.58
8 Contributor's Principal Occupation Consultant		9 Contributor's Job Title Consultant
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) de la Garza, Melissa Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$263.47
Contributor's Principal Occupation Attorney		Contributor's Job Title Principal at Law Office of Melissa de la Garza
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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: 1/7 Rpt: 18/24	2 FILER NAME Sage, Karen R. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065765
4 Date 07/21/2025	5 Payee name ADT Security	
6 Amount (\$) \$42.82	7 Payee address; City; State; Zip Code 1501 Yamato Rd Boca Raton, FL 33431	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Judicial Security	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Judicial Security
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/20/2025	Payee name ADT Security	
Amount (\$) \$42.82	Payee address; City; State; Zip Code 1501 Yamato Rd Boca Raton, FL 33431	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Judicial Security	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Judicial Security
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/22/2025	Payee name ADT Security	
Amount (\$) \$42.82	Payee address; City; State; Zip Code 1501 Yamato Rd Boca Raton, FL 33431	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Judicial Security	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Judicial Security
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: 2/7 Rpt: 19/24	2 FILER NAME Sage, Karen R. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065765
4 Date 11/03/2025	5 Payee name ADT Security	
6 Amount (\$) \$1,027.23	7 Payee address; City; State; Zip Code 1501 Yamato Rd Boca Raton, FL 33431	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Judicial Security	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Judicial Security
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name ADT Security	
Amount (\$) \$917.72	Payee address; City; State; Zip Code 1501 Yamato Rd Boca Raton, FL 33431	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Judicial Security	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Judicial Security
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/20/2025	Payee name ADT Security	
Amount (\$) \$42.82	Payee address; City; State; Zip Code 1501 Yamato Rd Boca Raton, FL 33431	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Judicial Security	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Judicial Security
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: 3/7 Rpt: 20/24	2 FILER NAME Sage, Karen R. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065765
4 Date 12/12/2025	5 Payee name American Bar Association	
6 Amount (\$) \$100.00	7 Payee address; City; 321 North Clark St Chicago, IL 60654	
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 Membership Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name Donateaway	
Amount (\$) \$1,233.58	Payee address; City; PO Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Cumulative processing fees for online donations for period
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/05/2025	Payee name National Association of Women Judges	
Amount (\$) \$250.00	Payee address; City; 1001 Connecticut Ave NW Suite 1138 Washington, DC 20036	
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 Donation
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: 4/7 Rpt: 21/24	2 FILER NAME Sage, Karen R. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065765
4 Date 09/08/2025	5 Payee name National Association of Women Judges	
6 Amount (\$) \$45.00	7 Payee address; City; State; Zip Code 1001 Connecticut Ave NW Suite 1138 Washington, DC 20036	
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 Membership Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/08/2025	Payee name National Association of Women Judges	
Amount (\$) \$45.00	Payee address; City; State; Zip Code 1001 Connecticut Ave NW Suite 1138 Washington, DC 20036	
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 Membership Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/08/2025	Payee name National Association of Women Judges	
Amount (\$) \$45.00	Payee address; City; State; Zip Code 1001 Connecticut Ave NW Suite 1138 Washington, DC 20036	
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 Membership Fees
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: 5/7 Rpt: 22/24	2 FILER NAME Sage, Karen R. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065765
4 Date 12/08/2025	5 Payee name National Association of Women Judges	
6 Amount (\$) \$45.00	7 Payee address; City; State; Zip Code 1001 Connecticut Ave NW Suite 1138 Washington, DC 20036	
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 Membership Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/10/2025	Payee name National Association of Women Judges	
Amount (\$) \$45.00	Payee address; City; State; Zip Code 1001 Connecticut Ave NW Suite 1138 Washington, DC 20036	
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 Membership Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/08/2025	Payee name National Association of Women Judges	
Amount (\$) \$45.00	Payee address; City; State; Zip Code 1001 Connecticut Ave NW Suite 1138 Washington, DC 20036	
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 Membership Fees
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: 6/7 Rpt: 23/24	2 FILER NAME Sage, Karen R. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065765
4 Date 10/15/2025	5 Payee name South Austin Democrats	
6 Amount (\$) \$500.00	7 Payee address; City; PO Box 152592 Austin, TX 78715	State; Zip Code
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 Donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Star Bar	Office sought Office held
Date 10/20/2025	Payee name Star Bar	
Amount (\$) \$113.08	Payee address; City; 600 W 6th Street Austin, TX 78701	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Event Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Travis County Democratic Party	Office sought Office held
Date 11/21/2025	Payee name Travis County Democratic Party	
Amount (\$) \$1,500.00	Payee address; City; 1311 E 6th Street Austin, TX 78702	State; Zip Code
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 Filing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/7 Rpt: 24/24	2 FILER NAME Sage, Karen R. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065765	
4 Date 11/25/2025	5 Payee name Wick, Jim		
6 Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code 11002 Point Clear Ct Austin, TX 78747		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held