

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers) 00086010	2 Total pages filed: 291		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST The Honorable Mihaela E.	MI	OFFICE USE ONLY		
	NICKNAME	LAST Plesa	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; PO Box 796311  Dallas, TX 75248			Date Hand-delivered or Date Postmarked		
				Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Mr.	MI			
	NICKNAME	LAST Todd S.  Hollenshead	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); PO Box 796311  Dallas, TX 75248		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION (972) 679-0513					
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) State Representative District 70			12 OFFICE SOUGHT (if known) State Representative District 70		

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

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

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13 C / OH NAME	Plesa, Mihaela E. (The Honorable)		14 Filer ID 00086010	(Ethics Commission Filers)
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>			
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME		
		COMMITTEE ADDRESS		
		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. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			\$ 167,548.19
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>			\$ 84,222.31
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 108,109.87
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 25,000.00

**17 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.

The Honorable Mihaela E. Plesa

\_\_\_\_\_  
Signature of Candidate or Officeholder

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

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

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

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

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<b>18</b> FILER NAME	<b>19</b> Filer ID	(Ethics Commission Filers)
Plesa, Mihaela E. (The Honorable)	00086010	
<b>20</b> SCHEDULE SUBTOTALS	NAME OF SCHEDULE	
	SUBTOTAL AMOUNT	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	163,949.48
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	3,598.71
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	84,222.31
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 A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/239 Rpt: 4/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apartment Association of Greater Dallas PAC .....  <b>6</b> Contributor address; City; State; Zip Code  Irving, TX 75038	<b>7</b> Amount of Contribution (\$) \$750.00
	<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben. E. Keith Company Texas PAC .....  Contributor address; City; State; Zip Code  Fort Worth, TX 76102	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HomePAC of Texas, Texas Association of Builders .....  Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$) \$250.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Association of Firefighters .....  Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$) \$750.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 10/03/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00002766) United Food & Commercial Workers International Union .....  Contributor address; City; State; Zip Code  Washington, DC 20006-1598	Amount of Contribution (\$) \$5,000.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/239 Rpt: 5/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 979 All Star LLC	<b>7</b> Amount of Contribution (\$) \$1,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77081	
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) Plano Isd
<b>Date</b> 08/26/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) A Oreilly, Deborah	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75025	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 08/15/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) A Oreilly, Deborah	<b>Amount of Contribution (\$)</b> \$47.00
	<b>Contributor address; City; State; Zip Code</b>  Frisco, TX 75036	
<b>Principal occupation / Job title (See Instructions)</b> Teacher		<b>Employer (See Instructions)</b> Plano Isd
<b>Date</b> 07/26/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) A Oreilly, Deborah	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75025	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 08/15/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) A Oreilly, Deborah	<b>Amount of Contribution (\$)</b> \$47.00
	<b>Contributor address; City; State; Zip Code</b>  Frisco, TX 75036	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/239 Rpt: 6/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A Pagone, Brittney	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Allison Park, PA 15101	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/16/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00011114) AFSCME People	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code  Washington, DC 20036	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abarca, Onofre Antonio	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Oakland, CA 94601	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abramowitz, Richard	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ackerman, Baer	Amount of Contribution (\$) \$18.00
	Contributor address; City; State; Zip Code  Plano, TX 75093	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Selg

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/239 Rpt: 7/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahlburn, Carol ..... <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>8</b> Principal occupation / Job title (See Instructions) Retired	<b>9</b> Employer (See Instructions) Retired
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahlburn, Carol ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahlburn, Carol ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahlburn, Carol ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$15.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahlburn, Carol ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/239 Rpt: 8/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahlburn, Carol	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahlburn, Carol	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ainslie, Daphny	Amount of Contribution (\$) \$875.00
	Contributor address; City; State; Zip Code  Austin, TX 78705	
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akins, Keith	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Allen, TX 75002	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akins, Keith	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Allen, TX 75002	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/239 Rpt: 9/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akins, Keith	<b>7</b> Amount of Contribution (\$) \$35.00
	<b>6</b> Contributor address; City; State; Zip Code  Allen, TX 75002	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aksoy, Darlene	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Coppell, TX 75019	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alba, Ex	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alba, Ex	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
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#: _____) Alcantar, Carol	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code  Richmond, IN 47374	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/239 Rpt: 10/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Stacy ..... <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703	<b>7</b> Amount of Contribution (\$) \$125.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) none
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, William ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) William Allen
Date 07/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almassi, Carol ..... Contributor address; City; State; Zip Code  Allen, TX 75013	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almassi, Carol ..... Contributor address; City; State; Zip Code  Allen, TX 75013	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almassi, Carol ..... Contributor address; City; State; Zip Code  Allen, TX 75013	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/239 Rpt: 11/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almassi, Carol ..... <b>6</b> Contributor address; City; State; Zip Code  Allen, TX 75013	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>8</b> Principal occupation / Job title (See Instructions) Not Employed	<b>9</b> Employer (See Instructions) Not Employed
Date 10/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almassi, Carol ..... Contributor address; City; State; Zip Code  Allen, TX 75013	Amount of Contribution (\$) \$15.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almassi, Carol ..... Contributor address; City; State; Zip Code  Allen, TX 75013	Amount of Contribution (\$) \$15.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almassi, Carol ..... Contributor address; City; State; Zip Code  Allen, TX 75013	Amount of Contribution (\$) \$15.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Altemir, David ..... Contributor address; City; State; Zip Code  Allen, TX 75002	Amount of Contribution (\$) \$47.00
	Principal occupation / Job title (See Instructions) mfg consultant	Employer (See Instructions) Altemir Consulting

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/239 Rpt: 12/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alves, Daniel	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  West Haven, CT 16516	
<b>8</b> Principal occupation / Job title (See Instructions) Project Manager		<b>9</b> Employer (See Instructions) MSP
<b>Date</b> 08/10/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Alyea, Nancy	<b>Amount of Contribution (\$)</b> \$47.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75024	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 08/04/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sarah	<b>Amount of Contribution (\$)</b> \$17.00
	<b>Contributor address; City; State; Zip Code</b>  Alpine, TX 79830	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 08/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sarah	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Contributor address; City; State; Zip Code</b>  Alpine, TX 79830	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 08/10/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sarah	<b>Amount of Contribution (\$)</b> \$15.00
	<b>Contributor address; City; State; Zip Code</b>  Alpine, TX 79830	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/239 Rpt: 13/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sarah ..... <b>6</b> Contributor address; City; State; Zip Code  Alpine, TX 79830	<b>7</b> Amount of Contribution (\$) \$17.00
	<b>8</b> Principal occupation / Job title (See Instructions) Retired	<b>9</b> Employer (See Instructions) Retired
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sarah ..... Contributor address; City; State; Zip Code  Alpine, TX 79830	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sarah ..... Contributor address; City; State; Zip Code  Alpine, TX 79830	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sarah ..... Contributor address; City; State; Zip Code  Alpine, TX 79830	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sarah ..... Contributor address; City; State; Zip Code  Alpine, TX 79830	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/239 Rpt: 14/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 11/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sarah ..... <b>6</b> Contributor address; City; State; Zip Code  Alpine, TX 79830	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>8</b> Principal occupation / Job title (See Instructions) Not Employed	<b>9</b> Employer (See Instructions) Not Employed
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sarah ..... Contributor address; City; State; Zip Code  Alpine, TX 79830	Amount of Contribution (\$) \$17.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sarah ..... Contributor address; City; State; Zip Code  Alpine, TX 79830	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sarah ..... Contributor address; City; State; Zip Code  Alpine, TX 79830	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sarah ..... Contributor address; City; State; Zip Code  Alpine, TX 79830	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/239 Rpt: 15/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sarah	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Alpine, TX 79830	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Scott	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Mckinney, TX 75070	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Scott	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Mckinney, TX 75070	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Scott	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  McKinney, TX 75070	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Scott	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  McKinney, TX 75070	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/239 Rpt: 16/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Scott	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  McKinney, TX 75070	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
<b>Date</b> 11/15/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Scott	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  McKinney, TX 75070	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 12/09/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Scott	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  McKinney, TX 75070	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 08/09/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Andre, Joel	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 08/06/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Applebee, Margaret	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  San Diego, CA 92104	
<b>Principal occupation / Job title (See Instructions)</b> Scientist		<b>Employer (See Instructions)</b> Illumina

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/239 Rpt: 17/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arledge, Emily ..... <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78746	<b>7</b> Amount of Contribution (\$) \$47.00
<b>8</b> Principal occupation / Job title (See Instructions) Software Engineer		<b>9</b> Employer (See Instructions) Block
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Anne ..... Contributor address; City; State; Zip Code  Plano, TX 75023	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Prosper Isd
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arroyo, Guadalupe ..... Contributor address; City; State; Zip Code  Crowley, TX 76036	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Aircraft Maintenance Technician		Employer (See Instructions) American Airlines
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atchison, lynn ..... Contributor address; City; State; Zip Code  Austin, TX 78731-1116	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Corporate Director		Employer (See Instructions) Various
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, James ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/239 Rpt: 18/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, James ..... <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	<b>7</b> Amount of Contribution (\$) \$17.00
	<b>8</b> Principal occupation / Job title (See Instructions) Retired	<b>9</b> Employer (See Instructions) Retired
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, James ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$17.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, James ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$17.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, James ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, James ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$17.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/239 Rpt: 19/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, James ..... <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	<b>7</b> Amount of Contribution (\$) \$17.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avery Tabrizi, Dona ..... Contributor address; City; State; Zip Code  Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avery Tabrizi, Dona ..... Contributor address; City; State; Zip Code  Austin, TX 78703	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIGHAM, CINDY ..... Contributor address; City; State; Zip Code  PLANO, TX 75074	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions) RISD
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIGHAM, CINDY ..... Contributor address; City; State; Zip Code  PLANO, TX 75074	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions) RISD

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/239 Rpt: 20/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 11/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIGHAM, CINDY	<b>7</b> Amount of Contribution (\$) \$3.00
	<b>6</b> Contributor address; City; State; Zip Code  PLANO, TX 75074	
<b>8</b> Principal occupation / Job title (See Instructions) Retired Teacher		<b>9</b> Employer (See Instructions) RISD
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BNSF Rail Pac	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76161	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baade, Elizabeth	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Chicago, IL 60610	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Linkedin
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Gary	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  Sunnyvale, CA 94087	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Gary	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  Sunnyvale, CA 94087	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/239 Rpt: 21/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Brenda ..... <b>6</b> Contributor address; City; State; Zip Code  Los Altos, CA 94024	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Eleanor Rogers ..... Contributor address; City; State; Zip Code  Dallas, TX 85252	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Emily ..... Contributor address; City; State; Zip Code  Plano, TX 75024	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) PNP		Employer (See Instructions) KAP
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barndt, Patricia ..... Contributor address; City; State; Zip Code  Harleysville, PA 19438	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Lawrence ..... Contributor address; City; State; Zip Code  Mckinney, TX 75070	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/239 Rpt: 22/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Lawrence	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Mckinney, TX 75070	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Lawrence	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Mckinney, TX 75070	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Vicki	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baughman, Carrie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Prosper, TX 75078	
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) Mdoncall
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baughman, Carrie	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Prosper, TX 75078	
Principal occupation / Job title (See Instructions) Nurse practitioner		Employer (See Instructions) MDonCall

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/239 Rpt: 23/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beasley, Wendy	<b>7</b> Amount of Contribution (\$) \$17.00
	<b>6</b> Contributor address; City; State; Zip Code  Denison, TX 75020	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Brian	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Denton, TX 76209	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Jeff	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Jeffrey	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Leonardo Drs
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beebe, Sharon	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Frisco, TX 75035	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Unisys

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/239 Rpt: 24/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beeks, Robert	<b>7</b> Amount of Contribution (\$) \$47.00
	<b>6</b> Contributor address; City; State; Zip Code  Argyle, TX 76226	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beeks, Robert	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Argyle, TX 76226	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behar, Rebecca A.	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Long Beach, CA 90815	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belanger, Margaret	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belanger, Margaret	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/239 Rpt: 25/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Sarah ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75093	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>8</b> Principal occupation / Job title (See Instructions) Project Manager	<b>9</b> Employer (See Instructions) Vertex
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Sarah ..... Contributor address; City; State; Zip Code  Mckinney, TX 75071	Amount of Contribution (\$) \$15.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Sarah ..... Contributor address; City; State; Zip Code  Mckinney, TX 75071	Amount of Contribution (\$) \$15.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Sarah ..... Contributor address; City; State; Zip Code  McKinney, TX 75071	Amount of Contribution (\$) \$15.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Sarah ..... Contributor address; City; State; Zip Code  McKinney, TX 75071	Amount of Contribution (\$) \$15.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/239 Rpt: 26/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 11/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Sarah ..... <b>6</b> Contributor address; City; State; Zip Code  McKinney, TX 75071	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>8</b> Principal occupation / Job title (See Instructions) Not Employed	<b>9</b> Employer (See Instructions) Not Employed
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Sarah ..... Contributor address; City; State; Zip Code  McKinney, TX 75071	Amount of Contribution (\$) \$15.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellessa, Karen ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$30.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergus, Jill ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Self	Employer (See Instructions) Self
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergus, Jill ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Self	Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 24/239 Rpt: 27/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)			<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/31/2025	<b>5</b> Full name of contributor Bergus, Jill	<input type="checkbox"/> out-of-state PAC (ID#: .....)	<b>7</b> Amount of Contribution (\$) \$35.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252		
<b>8</b> Principal occupation / Job title (See Instructions) Self		<b>9</b> Employer (See Instructions) Self	
Date 08/11/2025	Full name of contributor Bertulli, Karen	<input type="checkbox"/> out-of-state PAC (ID#: .....)	Amount of Contribution (\$) \$20.25
	Contributor address; City; State; Zip Code  Edina, MN 55436		
Principal occupation / Job title (See Instructions) Legal Publishing		Employer (See Instructions) Thomson Reuters	
Date 08/19/2025	Full name of contributor Besson, Taunee	<input type="checkbox"/> out-of-state PAC (ID#: .....)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Allen, TX 75013		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 08/09/2025	Full name of contributor Bhatia, Manasi	<input type="checkbox"/> out-of-state PAC (ID#: .....)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75025		
Principal occupation / Job title (See Instructions) Data Analyst		Employer (See Instructions) Ut Southwestern	
Date 08/08/2025	Full name of contributor Biggs, Randye	<input type="checkbox"/> out-of-state PAC (ID#: .....)	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Plano, TX 75075		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/239 Rpt: 28/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/25/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Biggs, Randye	<b>7</b> Amount of Contribution (\$) \$200.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigham, Cindy	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code  Plano, TX 75074	
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions) Risd
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigham, Cindy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Plano, TX 75074	
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions) Risd
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn, Timothy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UT Southwestern
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Block, Penny	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Evanston, IL 60201	
Principal occupation / Job title (See Instructions) Biobehavioral Oncoligy Clinician & Researcher		Employer (See Instructions) Block Ctr For Integrative Cancer Treatment

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/239 Rpt: 29/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/25/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blount, Susan	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703	
<b>8</b> Principal occupation / Job title (See Instructions) Self employed		<b>9</b> Employer (See Instructions) Susan Blount
<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Blum, Stephen	<b>Amount of Contribution (\$)</b> \$250.00
	<b>Contributor address; City; State; Zip Code</b>  Richardson, TX 75080	
<b>Principal occupation / Job title (See Instructions)</b> Real Estate Professional		<b>Employer (See Instructions)</b> Blum Management Group
<b>Date</b> 08/13/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Boethin, Tyler	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Chicago, IL 60610	
<b>Principal occupation / Job title (See Instructions)</b> Sales		<b>Employer (See Instructions)</b> SHI
<b>Date</b> 07/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogucki, Edra H	<b>Amount of Contribution (\$)</b> \$17.00
	<b>Contributor address; City; State; Zip Code</b>  Beaumont, TX 77707	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 07/01/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogucki, Edra H	<b>Amount of Contribution (\$)</b> \$17.00
	<b>Contributor address; City; State; Zip Code</b>  Beaumont, TX 77707	
<b>Principal occupation / Job title (See Instructions)</b> Not employed		<b>Employer (See Instructions)</b> Not employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/239 Rpt: 30/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolner, Kathy ..... <b>6</b> Contributor address; City; State; Zip Code  Mckinney, TX 75072	<b>7</b> Amount of Contribution (\$) \$17.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bond, David ..... Contributor address; City; State; Zip Code  Royse City, TX 75189	Amount of Contribution (\$) \$47.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonds, Caroline ..... Contributor address; City; State; Zip Code  Burlington, NC 27215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Survivor Relations Officer		Employer (See Instructions) Secu
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonitz, Julie ..... Contributor address; City; State; Zip Code  Burtonsville, MD 20866	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Booze, Valerie ..... Contributor address; City; State; Zip Code  Wilmington, NC 28409	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 28/239 Rpt: 31/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)			<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/03/2025	<b>5</b> Full name of contributor Bose, Sarmila	<input type="checkbox"/> out-of-state PAC (ID#: _____)	<b>7</b> Amount of Contribution (\$) \$70.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75024		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired	
Date 08/22/2025	Full name of contributor Bose, Sarmila	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Plano, TX 75024		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 09/30/2025	Full name of contributor Bose, Sarmila	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Plano, TX 75024		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 10/23/2025	Full name of contributor Bose, Sarmila	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  Plano, TX 75024		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 08/11/2025	Full name of contributor Bosquez, Felecia	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Hardware Resources	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 29/239 Rpt: 32/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)			<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/29/2025	<b>5</b> Full name of contributor Bowman, Florine	<input type="checkbox"/> out-of-state PAC (ID#: _____)	<b>7</b> Amount of Contribution (\$) \$17.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75024		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed	
Date 08/08/2025	Full name of contributor Boyer, Nancy	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  York, SC 29745		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 09/01/2025	Full name of contributor Boyle, Michael	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Santa Clara, CA 95051		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Lockheed Martin	
Date 09/30/2025	Full name of contributor Bramlett, Rob	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Plano, TX 75024		
Principal occupation / Job title (See Instructions) IT Engineer		Employer (See Instructions) Hilltop Holdings	
Date 08/29/2025	Full name of contributor Brenneman, Dana	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Dallas, TX 75238		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/239 Rpt: 33/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bresnen, Steve or Amy	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701	
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) BresnenAssociates, Inc.
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brett Cooper, M	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Jeri	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Houston, TX 77098	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) One World Strategy Group
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Peter	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Austin, TX 78751	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brossart, Shawn	Amount of Contribution (\$) \$20.25
	Contributor address; City; State; Zip Code  Austin, TX 78750	
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/239 Rpt: 34/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brotherhood of Locomotive Engineers and Trainmen .....  <b>6</b> Contributor address; City; State; Zip Code  Decatur, TX 77234	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>8</b> Principal occupation / Job title (See Instructions) Retired	<b>9</b> Employer (See Instructions) Employer (See Instructions) Retired
<b>Date</b> 08/08/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jean .....  <b>Contributor address; City; State; Zip Code</b>  Mckinney, TX 75072	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Principal occupation / Job title (See Instructions)</b> Retired	<b>Employer (See Instructions)</b> Employer (See Instructions) Retired
<b>Date</b> 10/26/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Morgan .....  <b>Contributor address; City; State; Zip Code</b>  Austin, TX 78756	<b>Amount of Contribution (\$)</b> \$125.00
	<b>Principal occupation / Job title (See Instructions)</b> Consultant	<b>Employer (See Instructions)</b> Employer (See Instructions) CFC
<b>Date</b> 09/09/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruder, Rebecca .....  <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75209	<b>Amount of Contribution (\$)</b> \$250.00
	<b>Principal occupation / Job title (See Instructions)</b> Not Employed	<b>Employer (See Instructions)</b> Employer (See Instructions) Not Employed
<b>Date</b> 08/04/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Brule, Linda .....  <b>Contributor address; City; State; Zip Code</b>  Plano, TX 75023	<b>Amount of Contribution (\$)</b> \$70.00
	<b>Principal occupation / Job title (See Instructions)</b> Retired	<b>Employer (See Instructions)</b> Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/239 Rpt: 35/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brusniak, Rosario	<b>7</b> Amount of Contribution (\$) \$35.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryan, HL and Helen	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Austin, TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Suzanne	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Austin, TX 78703	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office of Suzanne Bryant
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Lisa G	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) GCC
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buinger, Mary Kay	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Aubrey, TX 76227	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/239 Rpt: 36/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bundick, Luz	<b>7</b> Amount of Contribution (\$) \$17.00
	<b>6</b> Contributor address; City; State; Zip Code  Round Rock, TX 78680	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Mary Ann	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Bb&T
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Mary Ann	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) banker		Employer (See Instructions) BB&T
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Mary Ann	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) banker		Employer (See Instructions) BB&T
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Nicholas	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Frisco, TX 75035	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Condon Tobin Sladek Sparks Nerenberg PLLC

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/239 Rpt: 37/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burpo, Rebecca	<b>7</b> Amount of Contribution (\$) \$17.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75206	
<b>8</b> Principal occupation / Job title (See Instructions) Certified Nurse-Midwife		<b>9</b> Employer (See Instructions) Tx Tech Univ. Health Sci. Ctr.
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burpo, Rebecca	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Richardson, TX 75080	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burpo, Rebecca	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Richardson, TX 75080	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burpo, Rebecca	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Dallas, TX 75206	
Principal occupation / Job title (See Instructions) Certified Nurse-Midwife		Employer (See Instructions) Tx Tech Univ. Health Sci. Ctr.
Date 10/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burpo, Rebecca	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Richardson, TX 75080	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/239 Rpt: 38/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burpo, Rebecca	<b>7</b> Amount of Contribution (\$) \$17.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75206	
<b>8</b> Principal occupation / Job title (See Instructions) Certified Nurse-Midwife		<b>9</b> Employer (See Instructions) TX Tech Univ. Health Sci. Ctr.
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burpo, Rebecca	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Richardson, TX 75080	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burpo, Rebecca	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Dallas, TX 75206	
Principal occupation / Job title (See Instructions) Certified Nurse-Midwife		Employer (See Instructions) TX Tech Univ. Health Sci. Ctr.
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burpo, Rebecca	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Richardson, TX 75080	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burpo, Rebecca	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Dallas, TX 75206	
Principal occupation / Job title (See Instructions) Certified Nurse-Midwife		Employer (See Instructions) TX Tech Univ. Health Sci. Ctr.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/239 Rpt: 39/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Busbee, Brook	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75207	
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Dallas County Public Defender
<b>Date</b> 09/29/2025	<b>Full name of contributor</b> <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00039305</u> ) CITIGroup inc. PAC - STATE	<b>Amount of Contribution (\$)</b> \$2,000.00
	<b>Contributor address; City; State; Zip Code</b>  Washington, DC 20004	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 10/25/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) CONNELL, SUSAN	<b>Amount of Contribution (\$)</b> \$17.00
	<b>Contributor address; City; State; Zip Code</b>  Taylor, TX 76574	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 12/30/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) CONNELL, SUSAN	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Taylor, TX 76574	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 09/05/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) COURTRIGHT, JAMES	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  PLANO, TX 75023-3605	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/239 Rpt: 40/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cahalan, Caitlin	<b>7</b> Amount of Contribution (\$) \$20.25
	<b>6</b> Contributor address; City; State; Zip Code  Littleton, CO 80128	
<b>8</b> Principal occupation / Job title (See Instructions) Marketing		<b>9</b> Employer (See Instructions) Iqvia
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calautti, Nick	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Wylie, TX 75098	
Principal occupation / Job title (See Instructions) Engineering		Employer (See Instructions) Maximus
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camp, Roberta	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  Philadelphia, PA 19147	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Andrew	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Instructional Designer		Employer (See Instructions) Collin College
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Charlotte	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Goldsboro, NC 27534	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/239 Rpt: 41/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Larry	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>6</b> Contributor address; City; State; Zip Code  Brenham, TX 77833	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capp, Sue	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Compliance Advisor		Employer (See Instructions) Capital One
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capp, Susan	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Sachse, TX 75048	
Principal occupation / Job title (See Instructions) Compliance Advisor		Employer (See Instructions) Capital One
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carboneau, Laura	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Austin, TX 78751	
Principal occupation / Job title (See Instructions) Marketing Mgr		Employer (See Instructions) Dell
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlisle, John	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/239 Rpt: 42/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Dorsey	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704-2807	
<b>8</b> Principal occupation / Job title (See Instructions) psychotherapist		<b>9</b> Employer (See Instructions) self
<b>Date</b> 11/18/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Casarez, Mario	<b>Amount of Contribution (\$)</b> \$17.00
	<b>Contributor address; City; State; Zip Code</b>  Cameron, TX 76520	
<b>Principal occupation / Job title (See Instructions)</b> Executive Director		<b>Employer (See Instructions)</b> RHA
<b>Date</b> 10/27/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Casavant, Catherine	<b>Amount of Contribution (\$)</b> \$1,000.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 07/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Casavant, Michael	<b>Amount of Contribution (\$)</b> \$42.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Product Manager		<b>Employer (See Instructions)</b> Jpmorgan & Chase
<b>Date</b> 10/27/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Casavant, Michael	<b>Amount of Contribution (\$)</b> \$1,000.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075-4009	
<b>Principal occupation / Job title (See Instructions)</b> Product Manager		<b>Employer (See Instructions)</b> JPMorgan & Chase

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/239 Rpt: 43/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 11/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cesario, Robert	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Rolla, MO 65401	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Jeri	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Donor Relations Officer		Employer (See Instructions) CFT
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Champion, Steve	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Cinemark
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Stephen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Allen, TX 75002	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Stephen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Allen, TX 75002	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/239 Rpt: 44/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Stephen ..... <b>6</b> Contributor address; City; State; Zip Code  Allen, TX 75002	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>8</b> Principal occupation / Job title (See Instructions) Not employed	<b>9</b> Employer (See Instructions) Not employed
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Stephen ..... Contributor address; City; State; Zip Code  Allen, TX 75002	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Not employed	Employer (See Instructions) Not employed
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Stephen ..... Contributor address; City; State; Zip Code  Allen, TX 75002	Amount of Contribution (\$) \$25.00
	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#: _____) Charley, Jacqueline ..... Contributor address; City; State; Zip Code  Allen, TX 75002	Amount of Contribution (\$) \$15.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chirlin, Gary ..... Contributor address; City; State; Zip Code  Derwood, MD 20855	Amount of Contribution (\$) \$1.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 42/239 Rpt: 45/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chitty, Michael	<b>7</b> Amount of Contribution (\$) \$47.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78731	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cifarelli, Donna	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) City Of Plano
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clardy, Thelma	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Desoto, TX 75115	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Karen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Richardson, TX 75080	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Karen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Richardson, TX 75080	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 43/239 Rpt: 46/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/05/2025	<b>5</b> Full name of contributor Clark, Nathan	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Fate, TX 75087	
<b>8</b> Principal occupation / Job title (See Instructions) Lidar Tech		<b>9</b> Employer (See Instructions) Ltra
Date 08/05/2025	Full name of contributor Clark, Nathan	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Garland, TX 75043	
Principal occupation / Job title (See Instructions) Land Surveyor		Employer (See Instructions) Ltra
Date 09/30/2025	Full name of contributor Clayton, Crystal	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) SMU
Date 08/09/2025	Full name of contributor Clowes, Carol	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Mckinney, TX 75071	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/15/2025	Full name of contributor Coffee Prose, Kayla	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) St. Paul's E&R Ucc

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 44/239 Rpt: 47/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffee Prose, Kayla	<b>7</b> Amount of Contribution (\$) \$17.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75023	
<b>8</b> Principal occupation / Job title (See Instructions) Pastor		<b>9</b> Employer (See Instructions) St. Pauls E&R Ucc
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coggins, Jeannie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76133	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, John	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Denton, TX 76207	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier-Brown, Carrie	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Austin, TX 78746	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Locke Lord LLP
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colonescu, Ion	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Plano, TX 75024	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 45/239 Rpt: 48/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colonescu, Ion	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75024	
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions) NA
<b>Date</b> 08/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Colonescu, Ion	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75024	
<b>Principal occupation / Job title (See Instructions)</b> Engineer		<b>Employer (See Instructions)</b> NA
<b>Date</b> 12/27/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Colonescu, Ion	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75024	
<b>Principal occupation / Job title (See Instructions)</b> engineer		<b>Employer (See Instructions)</b> na
<b>Date</b> 09/04/2025	<b>Full name of contributor</b> <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00248716) Comcast Corporation & NBCUniversal PAC	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  Philadelphia, PA 19103	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 11/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Connor, Lydia	<b>Amount of Contribution (\$)</b> \$70.00
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75252	
<b>Principal occupation / Job title (See Instructions)</b> Social worker		<b>Employer (See Instructions)</b> CAC Collin County

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 46/239 Rpt: 49/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connors, Heidi	<b>7</b> Amount of Contribution (\$)  \$8.00
	<b>6</b> Contributor address; City; State; Zip Code  West Haven, CT 06516	
<b>8</b> Principal occupation / Job title (See Instructions) RN		<b>9</b> Employer (See Instructions) Optum Rx
<b>Date</b> 07/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Conrad, Sandra	<b>Amount of Contribution (\$)</b>  \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Consultant		<b>Employer (See Instructions)</b> Genesis 10
<b>Date</b> 08/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Conrad, Sandra	<b>Amount of Contribution (\$)</b>  \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Consultant		<b>Employer (See Instructions)</b> Genesis 10
<b>Date</b> 09/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Conrad, Sandra	<b>Amount of Contribution (\$)</b>  \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Consultant		<b>Employer (See Instructions)</b> Genesis 10
<b>Date</b> 10/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Conrad, Sandra	<b>Amount of Contribution (\$)</b>  \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Consultant		<b>Employer (See Instructions)</b> Genesis 10

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 47/239 Rpt: 50/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conrad, Sandra .....  <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>8</b> Principal occupation / Job title (See Instructions) Consultant	<b>9</b> Employer (See Instructions) Genesis 10
<b>Date</b> 11/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Conrad, Sandra .....  <b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Principal occupation / Job title (See Instructions)</b> Consultant	<b>Employer (See Instructions)</b> Genesis 10
<b>Date</b> 12/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Conrad, Sandra .....  <b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Principal occupation / Job title (See Instructions)</b> Consultant	<b>Employer (See Instructions)</b> Genesis 10
<b>Date</b> 12/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Conway, Keith .....  <b>Contributor address; City; State; Zip Code</b>  Vienna, VA 22180	<b>Amount of Contribution (\$)</b> \$17.00
	<b>Principal occupation / Job title (See Instructions)</b> Not Employed	<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 09/30/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Lisa .....  <b>Contributor address; City; State; Zip Code</b>  Plano, TX 75025	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Principal occupation / Job title (See Instructions)</b> Not Employed	<b>Employer (See Instructions)</b> Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 48/239 Rpt: 51/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cordell, Benjamin	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  Wylie, TX 75098	
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) Princeton Isd
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cortez, Marcy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Dallas, TX 75287	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cote, Scott	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Allen, TX 75002	
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Lucidworks
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cote, Scott	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Allen, TX 75002	
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Lucidworks
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coulston, Carol	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 49/239 Rpt: 52/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cousino, Kelsey	<b>7</b> Amount of Contribution (\$) \$70.00
	<b>6</b> Contributor address; City; State; Zip Code  The Hills, TX 78738	
<b>8</b> Principal occupation / Job title (See Instructions) Massage Therapist		<b>9</b> Employer (See Instructions) Massage Envy
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowden, Chris	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Austin, TX 78703	
Principal occupation / Job title (See Instructions) Art Gallery Director		Employer (See Instructions) Women & Their Work
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Carlton	Amount of Contribution (\$) \$13.00
	Contributor address; City; State; Zip Code  Asheville, NC 28805	
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Bear Mountain Builders
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronauer, Gail	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Dallas, TX 75220	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crossman, Steve	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Willits, CA 95490	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 50/239 Rpt: 53/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/19/2025	<b>5</b> Full name of contributor Crow, Carol	<b>7</b> Amount of Contribution (\$) \$47.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75093	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 12/27/2025	Full name of contributor Crow, Carol	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75093	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/08/2025	Full name of contributor Crowder, Phil	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79413	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/03/2025	Full name of contributor Crozier, Chad	Amount of Contribution (\$) \$110.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Independent Financial
Date 07/20/2025	Full name of contributor Cuellar, Deborah	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 51/239 Rpt: 54/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Leslie	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>6</b> Contributor address; City; State; Zip Code  Mckinney, TX 75071	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Leslie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  McKinney, TX 75071	
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#: _____) Cunningham, Leslie	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  McKinney, TX 75071	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dallas Firefighters Assn PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Dallas, TX 75243	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dallas Police Officer PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Dallas, TX 75215	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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## SCHEDULE A1

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<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Damri, Ava	<b>7</b> Amount of Contribution (\$) \$20.25
	<b>6</b> Contributor address; City; State; Zip Code  Euless, TX 76040	
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Deloitte
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darrah, Paul	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Thornton, CO 80241	
Principal occupation / Job title (See Instructions) EPS		Employer (See Instructions) Colorado
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dasgupta, Bhaskar	Amount of Contribution (\$) \$6.00
	Contributor address; City; State; Zip Code  Chicago, IL 60607	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UIC
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dauerty, Barbara	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Universal City, TX 78148	
Principal occupation / Job title (See Instructions) Physician Associate		Employer (See Instructions) Arthur Nagel Community Clinic
Date 07/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davanay, Mary	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  New Braunfels, TX 78132	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 53/239 Rpt: 56/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/25/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Ann ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75074	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Software Developer		<b>9</b> Employer (See Instructions) Catalyst Corporate Federal Credit Union
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Kenneth ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Equipment Engineer		Employer (See Instructions) Qorvo
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Day, Joanne ..... Contributor address; City; State; Zip Code  Austin, TX 78749	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deatherage, Carol ..... Contributor address; City; State; Zip Code  Bartonville, TX 76226	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deeds, Darryl ..... Contributor address; City; State; Zip Code  Rosanky, TX 78953	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 54/239 Rpt: 57/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Del Angel, Maria .....  <b>6</b> Contributor address; City; State; Zip Code  Pharr, TX 78577	<b>7</b> Amount of Contribution (\$) \$20.25
<b>8</b> Principal occupation / Job title (See Instructions) Receiving Manager		<b>9</b> Employer (See Instructions) Heb Grocery Alamo Tx
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delgado, Liliana .....  Contributor address; City; State; Zip Code  Plano, TX 75093	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Credit		Employer (See Instructions) Healthcare
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delgado-Frome, Gabriela .....  Contributor address; City; State; Zip Code  Parker, TX 75002	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/14/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00468314) Democracy Engine Inc. PAC .....  Contributor address; City; State; Zip Code  Washington , DC 20001	Amount of Contribution (\$) \$350.05
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Demotte, Jessica .....  Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Interior Design		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 55/239 Rpt: 58/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Depaola, Kathy	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94117	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Depew, Sarah	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Depew, Sarah	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Depew, Sarah	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  PLANO, TX 75075-7202	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Depew, Sarah	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  PLANO, TX 75075-7202	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 56/239 Rpt: 59/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/29/2025	<b>5</b> Full name of contributor Desmond, Thomas	<b>7</b> Amount of Contribution (\$) \$35.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/31/2025	Full name of contributor Dewar, Claire	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Dallas, TX 75209	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/31/2025	Full name of contributor Deweese, Kimberly	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75093	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) PWC
Date 08/10/2025	Full name of contributor Deweese, Kimberly	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Plano, TX 75093	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) PWC
Date 08/08/2025	Full name of contributor Dickens, Michael	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Plano, TX 75074	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 57/239 Rpt: 60/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickerson, Tracy	<b>7</b> Amount of Contribution (\$) \$1.00
	<b>6</b> Contributor address; City; State; Zip Code  Bainbridge Island, WA 98110	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diewald, Cherilyn	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Diagnostician		Employer (See Instructions) Frisco Isd
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Domingue, Sandra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  McKinney, TX 75070	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donaghey, Tanya	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Allen, TX 75002	
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Franklin University
Date 07/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Robert	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Grapevine, TX 76051	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 58/239 Rpt: 61/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Robert ..... <b>6</b> Contributor address; City; State; Zip Code  Grapevine, TX 76051	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>8</b> Principal occupation / Job title (See Instructions) Retired	<b>9</b> Employer (See Instructions) Retired
Date 07/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Robert ..... Contributor address; City; State; Zip Code  Grapevine, TX 76051	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Jesuit College Preparatory School	Employer (See Instructions) Teacher
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Robert ..... Contributor address; City; State; Zip Code  Grapevine, TX 76051	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Jesuit College Preparatory School	Employer (See Instructions) Teacher
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Robert ..... Contributor address; City; State; Zip Code  Grapevine, TX 76051	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Jesuit College Preparatory School	Employer (See Instructions) Teacher
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Robert ..... Contributor address; City; State; Zip Code  Grapevine, TX 76051	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 59/239 Rpt: 62/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Robert ..... <b>6</b> Contributor address; City; State; Zip Code  Grapevine, TX 76051	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>8</b> Principal occupation / Job title (See Instructions) Jesuit College Preparatory School	<b>9</b> Employer (See Instructions) Teacher
Date 10/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Robert ..... Contributor address; City; State; Zip Code  Grapevine, TX 76051	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Robert ..... Contributor address; City; State; Zip Code  Grapevine, TX 76051	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Jesuit College Preparatory School	Employer (See Instructions) Teacher
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Robert ..... Contributor address; City; State; Zip Code  Grapevine, TX 76051	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Robert ..... Contributor address; City; State; Zip Code  Grapevine, TX 76051	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Jesuit College Preparatory School	Employer (See Instructions) Teacher

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 60/239 Rpt: 63/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donahue, Robert ..... <b>6</b> Contributor address; City; State; Zip Code  Grapevine, TX 76051	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnellan, Daly ..... Contributor address; City; State; Zip Code  Chicago, IL 60610	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Travel Advisor		Employer (See Instructions) Self Employed
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnellan, Daly ..... Contributor address; City; State; Zip Code  Chicago, IL 60610	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Travel Advisor		Employer (See Instructions) Self Employed
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnellan, Daly ..... Contributor address; City; State; Zip Code  Chicago, IL 60610	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Travel Advisor		Employer (See Instructions) Self Employed
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnellan, Ed ..... Contributor address; City; State; Zip Code  Chicago, IL 60601	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Compliance Officer		Employer (See Instructions) Tp Capital

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 61/239 Rpt: 64/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Raven	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77047	
<b>8</b> Principal occupation / Job title (See Instructions) Director		<b>9</b> Employer (See Instructions) Sister District
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglass, Deanna	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Arlington, TX 76010	
Principal occupation / Job title (See Instructions) Resident Director		Employer (See Instructions) University Of Oklahoma
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Billi	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Ft Worth, TX 76135	
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Honey Bee Brand
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, William	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code  Austin, TX 78727	
Principal occupation / Job title (See Instructions) product development consultant		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dutia, Anne	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Educational Consultant		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 62/239 Rpt: 65/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duzan, Katie	<b>7</b> Amount of Contribution (\$) \$17.00
	<b>6</b> Contributor address; City; State; Zip Code  Arlington, TX 76013	
<b>8</b> Principal occupation / Job title (See Instructions) Marketing		<b>9</b> Employer (See Instructions) Veeva
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eager, Mary Beth	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Shelton School
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eager, Mary Beth	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Shelton School
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eager, Mary Beth	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Shelton School
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eager, Mary Beth	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Shelton School

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 63/239 Rpt: 66/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eager, Mary Beth .....  <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>8</b> Principal occupation / Job title (See Instructions) Educator	<b>9</b> Employer (See Instructions) Shelton School
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eager, Mary Beth .....  <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$15.00
	Principal occupation / Job title (See Instructions) Educator	Employer (See Instructions) Shelton School
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eager, Mary Beth .....  <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$15.00
	Principal occupation / Job title (See Instructions) Educator	Employer (See Instructions) Shelton School
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eager, Mary Beth .....  <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$47.00
	Principal occupation / Job title (See Instructions) Educator	Employer (See Instructions) Shelton School
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddington, Richard .....  <b>6</b> Contributor address; City; State; Zip Code  Chicago, IL 60654	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions) Commercial Real Estate	Employer (See Instructions) Back Nine Apartments

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 64/239 Rpt: 67/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Bridget ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Artist		<b>9</b> Employer (See Instructions) Self
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Carol ..... Contributor address; City; State; Zip Code  Atlanta, GA 30326	Amount of Contribution (\$)  \$20.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Kasey ..... Contributor address; City; State; Zip Code  Mckinney, TX 75070	Amount of Contribution (\$)  \$20.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ElHaffar, Hani ..... Contributor address; City; State; Zip Code  Plano, TX 75093	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) LivingAsOne
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elkins, Sandra ..... Contributor address; City; State; Zip Code  Plano, TX 75025	Amount of Contribution (\$)  \$47.00
Principal occupation / Job title (See Instructions) Art Instructor		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 65/239 Rpt: 68/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/25/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elkins, Sandra ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75025	<b>7</b> Amount of Contribution (\$) \$47.00
	<b>8</b> Principal occupation / Job title (See Instructions) Art Instructor	<b>9</b> Employer (See Instructions) Self
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elkins, Sandra ..... Contributor address; City; State; Zip Code  Plano, TX 75025	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Art Instructor	Employer (See Instructions) Self
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elkins, Sandra ..... Contributor address; City; State; Zip Code  Plano, TX 75025	Amount of Contribution (\$) \$17.00
	Principal occupation / Job title (See Instructions) Art Instructor	Employer (See Instructions) Self
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elkins, Sandra ..... Contributor address; City; State; Zip Code  Plano, TX 75025	Amount of Contribution (\$) \$47.00
	Principal occupation / Job title (See Instructions) Art Instructor	Employer (See Instructions) Self
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elledge, David ..... Contributor address; City; State; Zip Code  Houston, TX 77025	Amount of Contribution (\$) \$17.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 66/239 Rpt: 69/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Tim ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	<b>7</b> Amount of Contribution (\$) \$35.00
	<b>8</b> Principal occupation / Job title (See Instructions) Retired	<b>9</b> Employer (See Instructions) Retired
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Tim ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Tim ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Tim ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Tim ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$35.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 67/239 Rpt: 70/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/24/2025	<b>5</b> Full name of contributor Elliott, Tim	<b>7</b> Amount of Contribution (\$) \$35.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/27/2025	Full name of contributor Empson, Carol	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/09/2025	Full name of contributor Erman, Robert	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Bridgeport, CT 06604	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/03/2025	Full name of contributor Espinedo, Celeste	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Veterinary Hospital
Date 10/28/2025	Full name of contributor Exum, Cassidy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75093	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 68/239 Rpt: 71/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUSON, TERA ..... <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78746	<b>7</b> Amount of Contribution (\$) \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falcone, Beth ..... Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fickling, Sarah ..... Contributor address; City; State; Zip Code  McKinney, TX 75070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired RN		Employer (See Instructions) Retired
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fikes, Amy ..... Contributor address; City; State; Zip Code  Dallas, TX 75205	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Filak, Michael ..... Contributor address; City; State; Zip Code  Plano, TX 75093	Amount of Contribution (\$) \$47.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 69/239 Rpt: 72/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/10/2025	<b>5</b> Full name of contributor Fisk, Susan	<b>7</b> Amount of Contribution (\$) \$255.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75254	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/13/2025	Full name of contributor Flanagan, Karen	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code  Frisco, TX 75036	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/27/2025	Full name of contributor Flores, Yvette	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Austin, TX 78746	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/10/2025	Full name of contributor Flynn, Jenifer	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Dallas, TX 75225	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/01/2025	Full name of contributor Ford, Steven	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76116	
Principal occupation / Job title (See Instructions) Parole Officer		Employer (See Instructions) TDCJ

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 70/239 Rpt: 73/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Y	<b>7</b> Amount of Contribution (\$) \$1.00
	<b>6</b> Contributor address; City; State; Zip Code  Del Rio, TX 78840	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford li, Neil	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Chicago, IL 60657	
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Innovid
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fountain, Emma	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code  Plano, TX 75074	
Principal occupation / Job title (See Instructions) Product Engineering		Employer (See Instructions) Texas Instrument
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fredricks, Virginia	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Austin, TX 78703	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friends of UT Dallas PAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Dallas, TX 75240	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 71/239 Rpt: 74/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frierson, Tatiana	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75225	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fritzsche, John C	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Richardson, TX 75082	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulbright, Richard	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Neuropsychologist		Employer (See Instructions) Self
Date 08/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulbright, Richard	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Neuropsychologist		Employer (See Instructions) Self
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulbright, Richard	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Neuropsychologist		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 72/239 Rpt: 75/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulbright, Richard	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	
<b>8</b> Principal occupation / Job title (See Instructions) Neuropsychologist		<b>9</b> Employer (See Instructions) Self
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulbright, Richard	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Neuropsychologist		Employer (See Instructions) Self
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fyfe, Lori	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Mckinney, TX 75070	
Principal occupation / Job title (See Instructions) Pilot Instructor		Employer (See Instructions) Southwest Airlines
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fyfe, Lori	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Mckinney, TX 75070	
Principal occupation / Job title (See Instructions) Pilot Instructor		Employer (See Instructions) Southwest Airlines
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fyfe, Lori	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Mckinney, TX 75070	
Principal occupation / Job title (See Instructions) Pilot Instructor		Employer (See Instructions) Southwest Airlines

## MONETARY POLITICAL CONTRIBUTIONS

## **SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 73/239 Rpt: 76/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fyfe, Lori ..... <b>6</b> Contributor address; City; State; Zip Code  McKinney, TX 75070	<b>7</b> Amount of Contribution (\$) \$17.00
<b>8</b> Principal occupation / Job title (See Instructions) Pilot Instructor		<b>9</b> Employer (See Instructions) Southwest Airlines
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fyfe, Lori ..... Contributor address; City; State; Zip Code  McKinney, TX 75070	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Pilot Instructor		Employer (See Instructions) Southwest Airlines
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) G Reddy, Kris ..... Contributor address; City; State; Zip Code  Plano, TX 75024	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gajderowicz, Jason ..... Contributor address; City; State; Zip Code  Plano, TX 75024	Amount of Contribution (\$) \$47.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Greenhill School
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galindo, Lauren ..... Contributor address; City; State; Zip Code  San Antonio, TX 78261	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Sales Consulting		Employer (See Instructions) Self

## MONETARY POLITICAL CONTRIBUTIONS

## **SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 74/239 Rpt: 77/291
<b>2</b> FILER NAME  Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Gant, Alan ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) engineer		<b>9</b> Employer (See Instructions) self
<b>Date</b> 09/30/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)  Gant, Maria ..... <b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	<b>Amount of Contribution (\$)</b>  \$50.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Contran
<b>Date</b> 12/12/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)  Gant, Maria ..... <b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	<b>Amount of Contribution (\$)</b>  \$50.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Contran
<b>Date</b> 11/02/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)  Garcia, Cassandra (The Honorable) ..... <b>Contributor address; City; State; Zip Code</b>  Flower Mound, TX 75022	<b>Amount of Contribution (\$)</b>  \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
<b>Date</b> 08/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)  Garcia, David ..... <b>Contributor address; City; State; Zip Code</b>  Austin, TX 78756	<b>Amount of Contribution (\$)</b>  \$10.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) County

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 75/239 Rpt: 78/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Domingo	<b>7</b> Amount of Contribution (\$) \$1,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75247	
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Law Offices Of Domingo Garcia
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Francisco	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Dallas, TX 75287	
Principal occupation / Job title (See Instructions) Regional manager		Employer (See Instructions) City of Dallas
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Morris	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Ltdnow Llc
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Morris	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Ltdnow Llc
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner Sr, Richard	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  Chicago, IL 60620	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 76/239 Rpt: 79/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garvey, Daniel	<b>7</b> Amount of Contribution (\$) \$150.00
	<b>6</b> Contributor address; City; State; Zip Code  Chicago, IL 60610	
<b>8</b> Principal occupation / Job title (See Instructions) Finance Manager		<b>9</b> Employer (See Instructions) Core Spaces
<b>Date</b> 08/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Daniel	<b>Amount of Contribution (\$)</b> \$250.00
	<b>Contributor address; City; State; Zip Code</b>  Chicago, IL 60614	
<b>Principal occupation / Job title (See Instructions)</b> Investment Research		<b>Employer (See Instructions)</b> Corient
<b>Date</b> 08/14/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gherardi, James	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Chicago, IL 60610	
<b>Principal occupation / Job title (See Instructions)</b> Director Of Communications		<b>Employer (See Instructions)</b> Freedom For All Americans
<b>Date</b> 08/20/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilkes, Alan	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 07/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilkes, Alan	<b>Amount of Contribution (\$)</b> \$35.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 77/239 Rpt: 80/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilkes, Alan	<b>7</b> Amount of Contribution (\$) \$35.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Godfrey, Mark	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Godfrey, Mark	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldman, Beth	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Texas Redbud Dental
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldman, Wendy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Dallas, TX 75219	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Wenco Apparel Inc.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 78/239 Rpt: 81/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Katherine	<b>7</b> Amount of Contribution (\$) \$47.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75074	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Katherine	Amount of Contribution (\$) \$170.00
	Contributor address; City; State; Zip Code  Plano, TX 75074	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Katherine	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  Plano, TX 75074	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Katherine	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code  Plano, TX 75074	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Thomas	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Plano, TX 75074	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 79/239 Rpt: 82/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Thomas ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75074	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>8</b> Principal occupation / Job title (See Instructions) Retired	<b>9</b> Employer (See Instructions) Retired
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, Terry ..... Contributor address; City; State; Zip Code  Plano, TX 75024	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Tutor And Law School Coach	Employer (See Instructions) Gorman Advisory Llc
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, Terry ..... Contributor address; City; State; Zip Code  PLANO, TX 75024	Amount of Contribution (\$) \$70.00
	Principal occupation / Job title (See Instructions) Tutor and Law School Coach	Employer (See Instructions) Gorman Advisory LLC
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosewehr, Rocio ..... Contributor address; City; State; Zip Code  Plano, TX 75025	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Attorney	Employer (See Instructions) Rocio at Law PC
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottzman, Laura ..... Contributor address; City; State; Zip Code  San Carlos, CA 94070	Amount of Contribution (\$) \$23.81
	Principal occupation / Job title (See Instructions) Not employed	Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 80/239 Rpt: 83/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottzman, Laura	<b>7</b> Amount of Contribution (\$) \$24.81
	<b>6</b> Contributor address; City; State; Zip Code  San Carlos, CA 94070	
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gouel, Martha	Amount of Contribution (\$) \$20.25
	Contributor address; City; State; Zip Code  Lutherville, MD 21093	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Comptroller Of Maryland
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graeber, Mary	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Cave Creek, AZ 85331	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Janice	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Ai Writing Specialist		Employer (See Instructions) Scale Ai
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Janice	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  PLANO, TX 75075	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 81/239 Rpt: 84/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grannan, Shirley	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  San Marcos, CA 92078	
<b>8</b> Principal occupation / Job title (See Instructions) Tech Writer		<b>9</b> Employer (See Instructions) Prism
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Jason	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Federal Government
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenberg, Don	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  Sebastopol, CA 95472	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, Frederick	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Arlington, TX 76017	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greisdorf, Carole	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Plano, TX 75024	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Artcentre Of Plano

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 82/239 Rpt: 85/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Patricia	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Richardson, TX 75080	
<b>8</b> Principal occupation / Job title (See Instructions) Insurance Agent		<b>9</b> Employer (See Instructions) Brooke Hull Ins. Agency
<b>Date</b> 08/08/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gross, Ellen	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  San Diego, CA 92110	
<b>Principal occupation / Job title (See Instructions)</b> Attorney		<b>Employer (See Instructions)</b> Self
<b>Date</b> 10/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) HALLER, JOHN	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75023	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 10/02/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) HCA Texas Good Government Fund	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75240	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/05/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Nina	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75231	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 83/239 Rpt: 86/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halley, E	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Hewitt, TX 76643	
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) State Of Tx
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamblin, Andrea	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Richardson, TX 75080	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hameline, Elizabeth	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Irving, TX 75038	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hameline Law
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammond, Dosier	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  Princeton, NJ 08542	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamons, Monique	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Frisco, TX 75035	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 84/239 Rpt: 87/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Diana ..... <b>6</b> Contributor address; City; State; Zip Code  Lake Elsinore, CA 92530	<b>7</b> Amount of Contribution (\$) \$17.00
<b>8</b> Principal occupation / Job title (See Instructions) RN		<b>9</b> Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanserd, Mary ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Specialist Avp		Employer (See Instructions) PrimeLending
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haran, Angela ..... Contributor address; City; State; Zip Code  Mckinney, TX 75071	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardee, Jacqueline ..... Contributor address; City; State; Zip Code  Austin, TX 78723	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardrick, Glenna ..... Contributor address; City; State; Zip Code  Plano, TX 75023	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 85/239 Rpt: 88/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 11/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardrick, Glenna	<b>7</b> Amount of Contribution (\$) \$17.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75023	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hargrove, Cheryl	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  McKinney, TX 75072	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harkins, Nathan	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Dallas, TX 75204	
Principal occupation / Job title (See Instructions) Budget Manager		Employer (See Instructions) City of Dallas
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrell, Jackson	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrell, Jackson	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 86/239 Rpt: 89/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Stasia ..... <b>6</b> Contributor address; City; State; Zip Code  Benbrook, TX 76132	<b>7</b> Amount of Contribution (\$) \$20.25
<b>8</b> Principal occupation / Job title (See Instructions) Bank		<b>9</b> Employer (See Instructions) Bank
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Barbara ..... Contributor address; City; State; Zip Code  McKinney, TX 75069	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrower, Ken ..... Contributor address; City; State; Zip Code  Mount Hermon, CA 95041	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Paul ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Paul ..... Contributor address; City; State; Zip Code  Plano, TX 75075-1525	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 87/239 Rpt: 90/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartmann, Jonathan	<b>7</b> Amount of Contribution (\$) \$20.25
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions) University Of Texas At Dallas
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartung, Stephen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Deer Park, TX 77536	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harvey, Janet	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Georgetown, TX 78633	
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Cvent
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatcher, Brent	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayden, Marilee	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code  Frisco, TX 75035	
Principal occupation / Job title (See Instructions) Chief Information Officer		Employer (See Instructions) Pate Rehabilitation

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 88/239 Rpt: 91/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/13/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haygood, Leah	<b>7</b> Amount of Contribution (\$) \$1.00
	<b>6</b> Contributor address; City; State; Zip Code  Silver Spring, MD 20902	
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Buzzword Inc.
<b>Date</b> 08/08/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayward, Carolyn	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Palm Desert, CA 92211	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 09/18/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Heald, Freda	<b>Amount of Contribution (\$)</b> \$1,000.00
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75214	
<b>Principal occupation / Job title (See Instructions)</b> Teacher		<b>Employer (See Instructions)</b> Temple Emanu-el
<b>Date</b> 08/15/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Ernest	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  Chicago, IL 60614	
<b>Principal occupation / Job title (See Instructions)</b> Product Success		<b>Employer (See Instructions)</b> Datavant
<b>Date</b> 08/15/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Ernest	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  Chicago, IL 60614	
<b>Principal occupation / Job title (See Instructions)</b> Product Success		<b>Employer (See Instructions)</b> Datavant

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 89/239 Rpt: 92/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Marty	<b>7</b> Amount of Contribution (\$) \$17.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	
<b>8</b> Principal occupation / Job title (See Instructions) Marketing		<b>9</b> Employer (See Instructions) Healthsmart
<b>Date</b> 11/02/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Marty	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> MARKETING		<b>Employer (See Instructions)</b> HealthSmart
<b>Date</b> 12/04/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75230	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 12/27/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75230	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 08/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Heitzman, Maechen	<b>Amount of Contribution (\$)</b> \$20.25
	<b>Contributor address; City; State; Zip Code</b>  Everett, WA 98201	
<b>Principal occupation / Job title (See Instructions)</b> Bookkeeper		<b>Employer (See Instructions)</b> Ashworth

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 90/239 Rpt: 93/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hejl, Leah	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hejl, Leah	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hekster, Tobias	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Winnetka, IL 60093	
Principal occupation / Job title (See Instructions) Co-Cio		Employer (See Instructions) True Partner Capital
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hekster, Tobias	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Wilmette, IL 60091	
Principal occupation / Job title (See Instructions) Co-Cio		Employer (See Instructions) True Partner Capital
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrickson, Ashley	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Pisd

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## SCHEDULE A1

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<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/05/2025	<b>5</b> Full name of contributor Hendrickson, Sharon	<b>7</b> Amount of Contribution (\$) \$18.25
	<b>6</b> Contributor address; City; State; Zip Code  Dewey, AZ 86327	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor Hendrickson, Sharon	Amount of Contribution (\$) \$18.45
	Contributor address; City; State; Zip Code  Dewey, AZ 86327	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/05/2025	Full name of contributor Hendrickson, Sharon	Amount of Contribution (\$) \$4.55
	Contributor address; City; State; Zip Code  Dewey, AZ 86327	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/05/2025	Full name of contributor Hendrickson, Sharon	Amount of Contribution (\$) \$4.55
	Contributor address; City; State; Zip Code  Dewey, AZ 86327	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/05/2025	Full name of contributor Hendrickson, Sharon	Amount of Contribution (\$) \$4.55
	Contributor address; City; State; Zip Code  Dewey, AZ 86327	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 92/239 Rpt: 95/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrickson, Sharon	<b>7</b> Amount of Contribution (\$) \$4.55
	<b>6</b> Contributor address; City; State; Zip Code  Dewey, AZ 86327	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Donald	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Charlottesville, VA 22903	
Principal occupation / Job title (See Instructions) Recording Artist		Employer (See Instructions) Donald H. Henley
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermann, Donna	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Denison, TX 75020	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermann, Donna	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Denison, TX 75020	
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermann, Donna	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Denison, TX 75020	
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 93/239 Rpt: 96/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 11/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermann, Donna ..... <b>6</b> Contributor address; City; State; Zip Code  Denison, TX 75020	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>8</b> Principal occupation / Job title (See Instructions) not employed	<b>9</b> Employer (See Instructions) none
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermann, Donna ..... Contributor address; City; State; Zip Code  Denison, TX 75020	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) not employed	Employer (See Instructions) none
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Daisy ..... Contributor address; City; State; Zip Code  Katy, TX 77494	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) House Ma	Employer (See Instructions) Hernandez Leasing
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hester, Linda ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$17.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hewitt, Kathy ..... Contributor address; City; State; Zip Code  Dallas, TX 75208	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Realtor	Employer (See Instructions) Self

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 94/239 Rpt: 97/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Higgins, Lynda	<b>7</b> Amount of Contribution (\$) \$2.00
	<b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76109	
<b>8</b> Principal occupation / Job title (See Instructions) Higher Education Administrator		<b>9</b> Employer (See Instructions) TCU
<b>Date</b> 07/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Higgins, Lynda	<b>Amount of Contribution (\$)</b> \$3.00
	<b>Contributor address; City; State; Zip Code</b>  Fort Worth, TX 76109	
<b>Principal occupation / Job title (See Instructions)</b> Higher Education Administrator		<b>Employer (See Instructions)</b> TCU
<b>Date</b> 07/14/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hildenbrand, Dick	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75074	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 08/14/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hildenbrand, Dick	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75074	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 09/14/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hildenbrand, Dick	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75074	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 95/239 Rpt: 98/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hildenbrand, Dick	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75074	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
<b>Date</b> 11/14/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hildenbrand, Dick	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75074	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 12/14/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hildenbrand, Dick	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75074	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 08/03/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilderman, Julee	<b>Amount of Contribution (\$)</b> \$17.00
	<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77035	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 07/14/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillberry, Leslie	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75023	
<b>Principal occupation / Job title (See Instructions)</b> Business Analyst		<b>Employer (See Instructions)</b> Frontline Education

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 96/239 Rpt: 99/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillberry, Leslie	<b>7</b> Amount of Contribution (\$) \$7.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75023	
<b>8</b> Principal occupation / Job title (See Instructions) Business Analyst		<b>9</b> Employer (See Instructions) Frontline Education
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillberry, Leslie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Frontline Education
Date 07/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillberry, Leslie	Amount of Contribution (\$) \$7.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Frontline Education
Date 09/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillberry, Leslie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Frontline Education
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillberry, Leslie	Amount of Contribution (\$) \$7.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Frontline Education

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 97/239 Rpt: 100/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillberry, Leslie	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75023	
<b>8</b> Principal occupation / Job title (See Instructions) Business Analyst		<b>9</b> Employer (See Instructions) Frontline Education
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillberry, Leslie	Amount of Contribution (\$) \$7.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Frontline Education
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillberry, Leslie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Frontline Education
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillberry, Leslie	Amount of Contribution (\$) \$7.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Frontline Education
Date 12/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillberry, Leslie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Frontline Education

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 98/239 Rpt: 101/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillberry, Leslie	<b>7</b> Amount of Contribution (\$) \$7.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75023	
<b>8</b> Principal occupation / Job title (See Instructions) Business Analyst		<b>9</b> Employer (See Instructions) Frontline Education
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillegas, Bob	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Houston, TX 77080	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillegas, Bob	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Houston, TX 77080	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillegas, Bob	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Houston, TX 77080	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillegas, Bob	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Houston, TX 77080	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 99/239 Rpt: 102/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hiller, Jay	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78726	
<b>8</b> Principal occupation / Job title (See Instructions) Yoga Instructor		<b>9</b> Employer (See Instructions) Lasr
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilliard, Ron	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Dallas, TX 75231	
Principal occupation / Job title (See Instructions) Maintenance		Employer (See Instructions) The Villas At The Mansion
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hirsch, Sharon	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code  Addison, TX 75001	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Judy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Judy	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 100/239 Rpt: 103/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Judy ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Ryan ..... Contributor address; City; State; Zip Code  Chicago, IL 60611	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Cielo
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogan, Delight ..... Contributor address; City; State; Zip Code  Frisco, TX 75035	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Mrs.
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holbein, Richard ..... Contributor address; City; State; Zip Code  Dallas, TX 75287	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holbein, Richard ..... Contributor address; City; State; Zip Code  Dallas, TX 75287	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

## MONETARY POLITICAL CONTRIBUTIONS

## **SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 101/239 Rpt: 104/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmer, Julie	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75023	
<b>8</b> Principal occupation / Job title (See Instructions) Account Representativie		<b>9</b> Employer (See Instructions) LI Business Collective
<b>Date</b> 10/27/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmer, Julie	<b>Amount of Contribution (\$)</b> \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) self-employed		Employer (See Instructions) Mind's Eye Solutions Inc.
<b>Date</b> 08/08/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Holt, Lisa	<b>Amount of Contribution (\$)</b> \$17.00
	Contributor address; City; State; Zip Code  Plano, TX 75024	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) City Of Dallas
<b>Date</b> 08/13/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hornung, Clarence	<b>Amount of Contribution (\$)</b> \$3.00
	Contributor address; City; State; Zip Code  Louisville, KY 40219	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
<b>Date</b> 08/10/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Houdek, John	<b>Amount of Contribution (\$)</b> \$70.00
	Contributor address; City; State; Zip Code  Plano, TX 75024	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) HDR

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 102/239 Rpt: 105/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houlihan, Rita  <b>6</b> Contributor address; City; State; Zip Code  Ny, NY 10025	<b>7</b> Amount of Contribution (\$) \$21.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houlihan, Rita  Contributor address; City; State; Zip Code  Ny, NY 10025	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Dale  Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$47.00
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#: _____) Hower, Miste  Contributor address; City; State; Zip Code  Austin, TX 78746	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Self
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hsieh, Teddy  Contributor address; City; State; Zip Code  Allen, TX 75013	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 103/239 Rpt: 106/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hsieh, Teddy	<b>7</b> Amount of Contribution (\$) \$47.00
	<b>6</b> Contributor address; City; State; Zip Code  Cambridge, MA 02139	
<b>8</b> Principal occupation / Job title (See Instructions) Graduate Worker		<b>9</b> Employer (See Instructions) MIT
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubenak, Elizabeth	Amount of Contribution (\$) \$7.00
	Contributor address; City; State; Zip Code  Austin, TX 78750	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubenak, Elizabeth	Amount of Contribution (\$) \$7.00
	Contributor address; City; State; Zip Code  Austin, TX 78750	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubenak, Elizabeth	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Albuquerque, NM 87123	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubenak, Elizabeth	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Albuquerque, NM 87123-4134	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 104/239 Rpt: 107/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubenak, Elizabeth	<b>7</b> Amount of Contribution (\$) \$7.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78750	
<b>8</b> Principal occupation / Job title (See Instructions) not employed		<b>9</b> Employer (See Instructions) none
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubenak, Elizabeth	Amount of Contribution (\$) \$7.00
	Contributor address; City; State; Zip Code  Austin, TX 78750	
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubenak, Elizabeth	Amount of Contribution (\$) \$7.00
	Contributor address; City; State; Zip Code  Austin, TX 78750	
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubenak, Elizabeth	Amount of Contribution (\$) \$7.00
	Contributor address; City; State; Zip Code  Austin, TX 78750	
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubert, Dawna	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Allen, TX 75002	
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Life Association

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 105/239 Rpt: 108/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/25/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huch, Mary ..... <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	<b>7</b> Amount of Contribution (\$) \$47.00
	<b>8</b> Principal occupation / Job title (See Instructions) Retired	<b>9</b> Employer (See Instructions) Retired
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huch, Mary ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huch, Mary ..... Contributor address; City; State; Zip Code  Dallas, TX 75252-6874	Amount of Contribution (\$) \$47.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudak, Sharon ..... Contributor address; City; State; Zip Code  Plano, TX 75023	Amount of Contribution (\$) \$17.00
	Principal occupation / Job title (See Instructions) Instructor	Employer (See Instructions) Music & Arts
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulse, Donald ..... Contributor address; City; State; Zip Code  Shelton, WA 98584	Amount of Contribution (\$) \$1.64
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 106/239 Rpt: 109/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 11/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Evan  <b>6</b> Contributor address; City; State; Zip Code  Mckinney, TX 75072	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Business Development		<b>9</b> Employer (See Instructions) Echodyne
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IBEW PAC Voluntary Fund  Contributor address; City; State; Zip Code  Washington, DC 20001	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isis, Melanie  Contributor address; City; State; Zip Code  Silver Spring, MD 20910	Amount of Contribution (\$) \$2.05
Principal occupation / Job title (See Instructions) Gardener		Employer (See Instructions) Self
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isom, Margaret  Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Israel, Celia  Contributor address; City; State; Zip Code  Austin, TX 78745	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 107/239 Rpt: 110/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivaska, Ritone	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Windsor, CT 06095	
<b>8</b> Principal occupation / Job title (See Instructions) Strings/Orchestra Teacher		<b>9</b> Employer (See Instructions) Ana Grace Academy Of The Arts Ms
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J Maienschein, Susan	Amount of Contribution (\$) \$170.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JABLONSKI, Carol	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Dallas, TX 75248	
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#: _____) Jablonski, Carol	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Dallas, TX 75248	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jablonski, Carol	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Dallas, TX 75248	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 108/239 Rpt: 111/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jablonski, Carol ..... <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75248	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Sharon ..... Contributor address; City; State; Zip Code  Dallas, TX 75243	Amount of Contribution (\$) \$47.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson Jr., Kevin M. ..... Contributor address; City; State; Zip Code  Austin, TX 78748	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Educational Diagnostician		Employer (See Instructions) Del Valle Isd
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaffe, Anna ..... Contributor address; City; State; Zip Code  Durham, NC 27705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Duke
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jardine, Kara ..... Contributor address; City; State; Zip Code  Montecito, CA 93108	Amount of Contribution (\$) \$47.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 109/239 Rpt: 112/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe, Edward	<b>7</b> Amount of Contribution (\$) \$47.00
	<b>6</b> Contributor address; City; State; Zip Code  Bakersfield, CA 93306	
<b>8</b> Principal occupation / Job title (See Instructions) Hospital Accountant		<b>9</b> Employer (See Instructions) County Of Kern
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jacalyn	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  Eugene, OR 97404	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jody	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Dallas, TX 75248	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jody	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Dallas, TX 75248	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Samuel	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) JFLG

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 110/239 Rpt: 113/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 11/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jolly, Aaron ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75074	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Tax Manager		<b>9</b> Employer (See Instructions) Rosewood
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Allyson ..... Contributor address; City; State; Zip Code  Elgin, TX 78621	Amount of Contribution (\$) \$47.00
Principal occupation / Job title (See Instructions) Investigator		Employer (See Instructions) Texas Mutual
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Darrell ..... Contributor address; City; State; Zip Code  Port Townsend, WA 98368	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Eric ..... Contributor address; City; State; Zip Code  Seattle, WA 98103	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) HPE
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Carole ..... Contributor address; City; State; Zip Code  Dallas, TX 75205	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 111/239 Rpt: 114/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judson, Tim	<b>7</b> Amount of Contribution (\$) \$17.00
	<b>6</b> Contributor address; City; State; Zip Code  Richardson, TX 75080	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karol, Jennifer	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Dallas, TX 75229	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kastl, Kristina N.	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Dallas, TX 75204	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) KASTL LAW PC
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kauffman, Adam	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Baltimore, MD 21229	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Mount Saint Joseph High School
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kauffman, Kristopher	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) BRP

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 112/239 Rpt: 115/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)			<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Raymond ..... <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76111	<b>7</b> Amount of Contribution (\$)  \$17.00	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired	
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Raymond ..... Contributor address; City; State; Zip Code  Fort Worth, TX 76111	Amount of Contribution (\$)  \$25.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kellom, Marc ..... Contributor address; City; State; Zip Code  Mckinney, TX 75070	Amount of Contribution (\$)  \$70.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelso Winter, Jane ..... Contributor address; City; State; Zip Code  Spring, TX 77381	Amount of Contribution (\$)  \$5.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Karlee ..... Contributor address; City; State; Zip Code  Chicago, IL 60641	Amount of Contribution (\$)  \$200.00	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Voxeq	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 113/239 Rpt: 116/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)			<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerr, Mary ..... <b>6</b> Contributor address; City; State; Zip Code  Mpls, MN 55404	<b>7</b> Amount of Contribution (\$)  \$1.00	
<b>8</b> Principal occupation / Job title (See Instructions) House Cleaning		<b>9</b> Employer (See Instructions) Two Bettys Green Cleaning	
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kind, Viki ..... Contributor address; City; State; Zip Code  Granada Hills, CA 91344	Amount of Contribution (\$)  \$5.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Joseph ..... Contributor address; City; State; Zip Code  Glen Flora, TX 77443	Amount of Contribution (\$)  \$5.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None	
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Joseph ..... Contributor address; City; State; Zip Code  Glen Flora, TX 77443	Amount of Contribution (\$)  \$5.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None	
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Joseph ..... Contributor address; City; State; Zip Code  Glen Flora, TX 77443	Amount of Contribution (\$)  \$5.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 114/239 Rpt: 117/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Joseph ..... <b>6</b> Contributor address; City; State; Zip Code  Glen Flora, TX 77443	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>8</b> Principal occupation / Job title (See Instructions) Retired	<b>9</b> Employer (See Instructions) None
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Joseph ..... Contributor address; City; State; Zip Code  Glen Flora, TX 77443	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) None
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Joseph ..... Contributor address; City; State; Zip Code  Glen Flora, TX 77443	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) None
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Mindy ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$250.00
	Principal occupation / Job title (See Instructions) Communications Manager	Employer (See Instructions) Intuit
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Elisa ..... Contributor address; City; State; Zip Code  Plano, TX 75025	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) IT Consultant	Employer (See Instructions) MKC Create

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 115/239 Rpt: 118/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleinman, Betsy	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75230	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleinman, Betsy	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Dallas, TX 75230	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knott, Jonathan	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Chicago, IL 60610	
Principal occupation / Job title (See Instructions) Tech		Employer (See Instructions) Tapcart
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knudsen, Alderman Timmy	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  Chicago, IL 60614	
Principal occupation / Job title (See Instructions) Alderman		Employer (See Instructions) Chicago City City Council
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knudson, Craig	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 116/239 Rpt: 119/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor Koerner, Laura	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  Los Angeles, CA 91311	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/05/2025	Full name of contributor Kopp, Yvette	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75024	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/03/2025	Full name of contributor Kosobud, Terry	Amount of Contribution (\$) \$170.00
	Contributor address; City; State; Zip Code  Austin, TX 78749	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/11/2025	Full name of contributor Kozmetsky, Cindy	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Dallas, TX 75219	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/15/2025	Full name of contributor Kraus, Lisa	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Dallas, TX 75209	
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 117/239 Rpt: 120/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/15/2025	<b>5</b> Full name of contributor Kraus, Lisa	<b>7</b> Amount of Contribution (\$) \$1,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75209	
<b>8</b> Principal occupation / Job title (See Instructions) Writer		<b>9</b> Employer (See Instructions) N/A
<b>Date</b> 08/09/2025	<b>Full name of contributor</b> Kravitz, Lisa	<b>Amount of Contribution (\$)</b> \$30.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75025	
<b>Principal occupation / Job title (See Instructions)</b> Software Engineer		<b>Employer (See Instructions)</b> HPE
<b>Date</b> 07/01/2025	<b>Full name of contributor</b> Kriscunas, Suzanne	<b>Amount of Contribution (\$)</b> \$250.00
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75219	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 10/31/2025	<b>Full name of contributor</b> Krishna, Sanjay	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75025	
<b>Principal occupation / Job title (See Instructions)</b> Software engineer		<b>Employer (See Instructions)</b> Dell
<b>Date</b> 08/09/2025	<b>Full name of contributor</b> Krombach, Robert	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Richardson, TX 75082	
<b>Principal occupation / Job title (See Instructions)</b> Sales		<b>Employer (See Instructions)</b> Preferred Office

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 118/239 Rpt: 121/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kurz, Theresa	<b>7</b> Amount of Contribution (\$) \$2.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75287	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) None
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kyrouz, Elaina	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  San Jose, CA 95129	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) L Prentice, Cara	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) L Prentice, Cara	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lach, Joseph	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Houston, TX 77098	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Noble Energy Inc.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 119/239 Rpt: 122/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacher, Kerri	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75209	
<b>8</b> Principal occupation / Job title (See Instructions) Interior Designer		<b>9</b> Employer (See Instructions) Self Employed
<b>Date</b> 12/05/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Laffey, Anita	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Allen, TX 75013	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 08/04/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lahpor, Kaci	<b>Amount of Contribution (\$)</b> \$250.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Director Of Household Operations And Management		<b>Employer (See Instructions)</b> Lahpor Inc.
<b>Date</b> 08/08/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Frank	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75218	
<b>Principal occupation / Job title (See Instructions)</b> Physician		<b>Employer (See Instructions)</b> Self
<b>Date</b> 08/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Frank	<b>Amount of Contribution (\$)</b> \$15.00
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75218	
<b>Principal occupation / Job title (See Instructions)</b> Physician		<b>Employer (See Instructions)</b> Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 120/239 Rpt: 123/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Frank	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75218	
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Self
<b>Date</b> 08/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Jason	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75025	
<b>Principal occupation / Job title (See Instructions)</b> Computer Consultant		<b>Employer (See Instructions)</b> Capgemini
<b>Date</b> 07/15/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lang, Gerry	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Westport, CT 06880	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 08/15/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lang, Gerry	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Westport, CT 16880	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 09/15/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lang, Gerry	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Westport, CT 06880	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 121/239 Rpt: 124/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lang, Gerry	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Westport, CT 16880	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langford, Melanie	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Dallas, TX 75238	
Principal occupation / Job title (See Instructions) Medical Assistant		Employer (See Instructions) Usa Plastic Surgery
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langford, Melanie	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Dallas, TX 75238	
Principal occupation / Job title (See Instructions) Medical Assistant		Employer (See Instructions) Usa Plastic Surgery
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langhurst, Jay	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) IT Analyst		Employer (See Instructions) Salesforce
Date 07/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lantz, Tarrah	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Plano, TX 75074	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 122/239 Rpt: 125/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lantz, Tarrah ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75074	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>8</b> Principal occupation / Job title (See Instructions) Retired	<b>9</b> Employer (See Instructions) Retired
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lantz, Tarrah ..... Contributor address; City; State; Zip Code  Plano, TX 75074	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Not employed	Employer (See Instructions) Not employed
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lantz, Tarrah ..... Contributor address; City; State; Zip Code  Plano, TX 75074	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Not employed	Employer (See Instructions) Not employed
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lantz, Tarrah ..... Contributor address; City; State; Zip Code  Plano, TX 75074	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Not employed	Employer (See Instructions) Not employed
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lantz, Tarrah ..... Contributor address; City; State; Zip Code  Plano, TX 75074	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Not employed	Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 123/239 Rpt: 126/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny ..... <b>6</b> Contributor address; City; State; Zip Code  Richardson, TX 75080	<b>7</b> Amount of Contribution (\$)  \$10.00
	<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Broker	<b>9</b> Employer (See Instructions) Self
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny ..... Contributor address; City; State; Zip Code  Richardson, TX 75080	Amount of Contribution (\$)  \$24.00
	Principal occupation / Job title (See Instructions) Real Estate Broker	Employer (See Instructions) Self
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny ..... Contributor address; City; State; Zip Code  Richardson, TX 75080	Amount of Contribution (\$)  \$42.00
	Principal occupation / Job title (See Instructions) Real Estate Broker	Employer (See Instructions) Self
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny ..... Contributor address; City; State; Zip Code  Richardson, TX 75080	Amount of Contribution (\$)  \$24.00
	Principal occupation / Job title (See Instructions) Real Estate Broker	Employer (See Instructions) Self
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny ..... Contributor address; City; State; Zip Code  Richardson, TX 75080	Amount of Contribution (\$)  \$10.00
	Principal occupation / Job title (See Instructions) Real Estate Broker	Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 124/239 Rpt: 127/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny ..... <b>6</b> Contributor address; City; State; Zip Code  Richardson, TX 75080	<b>7</b> Amount of Contribution (\$)  \$10.00
	<b>8</b> Principal occupation / Job title (See Instructions) Real estate broker	<b>9</b> Employer (See Instructions) Self
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny ..... Contributor address; City; State; Zip Code  Richardson, TX 75080	Amount of Contribution (\$)  \$10.00
	Principal occupation / Job title (See Instructions) Real estate broker	Employer (See Instructions) Self
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny ..... Contributor address; City; State; Zip Code  Richardson, TX 75080	Amount of Contribution (\$)  \$250.00
	Principal occupation / Job title (See Instructions) Realtor	Employer (See Instructions) Self
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny ..... Contributor address; City; State; Zip Code  Richardson, TX 75080	Amount of Contribution (\$)  \$10.00
	Principal occupation / Job title (See Instructions) Real estate broker	Employer (See Instructions) Self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny ..... Contributor address; City; State; Zip Code  Richardson, TX 75080	Amount of Contribution (\$)  \$10.00
	Principal occupation / Job title (See Instructions) Real estate broker	Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 125/239 Rpt: 128/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/30/2025	<b>5</b> Full name of contributor Law, Kathleen	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) None
Date 10/28/2025	Full name of contributor Law, Leonard	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/30/2025	Full name of contributor Law, Leonard	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/07/2025	Full name of contributor Lawler, Martha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  La Pine, OR 97739	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 08/07/2025	Full name of contributor Laycock, David	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  Chester, NJ 07930	
Principal occupation / Job title (See Instructions) Driver		Employer (See Instructions) UPS

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 126/239 Rpt: 129/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Layden, Marsha	<b>7</b> Amount of Contribution (\$) \$17.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75024	
<b>8</b> Principal occupation / Job title (See Instructions) Optician		<b>9</b> Employer (See Instructions) Retired
Date 10/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ledbetter, Cheryl	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehnen, Anna	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Durham, NC 27712	
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Duke University
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemons, Jeanie	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code  Plano, TX 75024	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard, Steve	Amount of Contribution (\$) \$107.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 127/239 Rpt: 130/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard, Steve ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>8</b> Principal occupation / Job title (See Instructions) Retired	<b>9</b> Employer (See Instructions) Retired
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard, Steve ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$107.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard, Steve ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$107.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard, Steve ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard, Steve ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$107.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 128/239 Rpt: 131/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 11/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard, Steve ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	<b>7</b> Amount of Contribution (\$) \$107.00
	<b>8</b> Principal occupation / Job title (See Instructions) Not Employed	<b>9</b> Employer (See Instructions) Not Employed
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard, Steve ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$107.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonetti, Gina Maria ..... Contributor address; City; State; Zip Code  New York, NY 10022	Amount of Contribution (\$) \$70.00
	Principal occupation / Job title (See Instructions) Freelance Film/Tv Producer	Employer (See Instructions) Self
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levitt, Florence ..... Contributor address; City; State; Zip Code  Ny, NY 10003	Amount of Contribution (\$) \$15.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Private ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$70.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired

## MONETARY POLITICAL CONTRIBUTIONS

## **SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 129/239 Rpt: 132/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goggan Blair & Sampson LLP	<b>7</b> Amount of Contribution (\$) \$1,500.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78760	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 07/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, Sharon	<b>Amount of Contribution (\$)</b> \$50.00
	Contributor address; City; State; Zip Code  Arlington, TX 76001	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
<b>Date</b> 09/20/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd Doggett For Congress	<b>Amount of Contribution (\$)</b> \$1,000.00
	Contributor address; City; State; Zip Code  Austin, TX 78763	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>Date</b> 08/12/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockwood, Lamont	<b>Amount of Contribution (\$)</b> \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75093	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
<b>Date</b> 08/27/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Loden, Mary	<b>Amount of Contribution (\$)</b> \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75024	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 130/239 Rpt: 133/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longo, Antonella ..... <b>6</b> Contributor address; City; State; Zip Code  Highland Village, TX 75077	<b>7</b> Amount of Contribution (\$) \$70.00
	<b>8</b> Principal occupation / Job title (See Instructions) Research Scientist	<b>9</b> Employer (See Instructions) UNT
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longo, Antonella ..... Contributor address; City; State; Zip Code  Highland Village, TX 75077	Amount of Contribution (\$) \$27.00
	Principal occupation / Job title (See Instructions) Research Scientist	Employer (See Instructions) UNT
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longo, Antonella ..... Contributor address; City; State; Zip Code  Highland Village, TX 75077	Amount of Contribution (\$) \$27.00
	Principal occupation / Job title (See Instructions) Research Scientist	Employer (See Instructions) UNT
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longo, Antonella ..... Contributor address; City; State; Zip Code  Highland Village, TX 75077	Amount of Contribution (\$) \$27.00
	Principal occupation / Job title (See Instructions) research scientist	Employer (See Instructions) UNT
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longo, Antonella ..... Contributor address; City; State; Zip Code  Highland Village, TX 75077	Amount of Contribution (\$) \$27.00
	Principal occupation / Job title (See Instructions) research scientist	Employer (See Instructions) UNT

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 131/239 Rpt: 134/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longo, Antonella	<b>7</b> Amount of Contribution (\$) \$27.00
	<b>6</b> Contributor address; City; State; Zip Code  Highland Village, TX 75077	
<b>8</b> Principal occupation / Job title (See Instructions) research scientist		<b>9</b> Employer (See Instructions) UNT
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Looney, Jason	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Roselle, IL 60172	
Principal occupation / Job title (See Instructions) Logistics		Employer (See Instructions) Ch Robinson
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Gregi	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Gregi	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Gregi	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 132/239 Rpt: 135/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Gregi  <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	<b>7</b> Amount of Contribution (\$) \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorance, Nancy  Contributor address; City; State; Zip Code  Plano, TX 75025	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lott, Sarah  Contributor address; City; State; Zip Code  Dallas, TX 75224	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Cushman & Wakefield
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Faith  Contributor address; City; State; Zip Code  Dallas, TX 75287	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Pepsico
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Faith  Contributor address; City; State; Zip Code  Dallas, TX 75287	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Pepsico

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 133/239 Rpt: 136/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Faith ..... <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75287	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>8</b> Principal occupation / Job title (See Instructions) Analyst	<b>9</b> Employer (See Instructions) Pepsico
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Faith ..... Contributor address; City; State; Zip Code  Dallas, TX 75287	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Analyst	Employer (See Instructions) Pepsico
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Faith ..... Contributor address; City; State; Zip Code  Dallas, TX 75287	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Analyst	Employer (See Instructions) PepsiCo
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Faith ..... Contributor address; City; State; Zip Code  Dallas, TX 75287	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Analyst	Employer (See Instructions) PepsiCo
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Faith ..... Contributor address; City; State; Zip Code  Dallas, TX 75287	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Analyst	Employer (See Instructions) PepsiCo

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 134/239 Rpt: 137/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Faith ..... <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75287	<b>7</b> Amount of Contribution (\$) \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Analyst		<b>9</b> Employer (See Instructions) PepsiCo
<b>Date</b> 11/10/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Faith ..... <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75287	<b>Amount of Contribution (\$)</b> \$25.00
<b>Principal occupation / Job title (See Instructions)</b> Analyst		<b>Employer (See Instructions)</b> PepsiCo
<b>Date</b> 11/24/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Faith ..... <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75287	<b>Amount of Contribution (\$)</b> \$10.00
<b>Principal occupation / Job title (See Instructions)</b> Analyst		<b>Employer (See Instructions)</b> PepsiCo
<b>Date</b> 12/10/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Faith ..... <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75287	<b>Amount of Contribution (\$)</b> \$25.00
<b>Principal occupation / Job title (See Instructions)</b> Analyst		<b>Employer (See Instructions)</b> PepsiCo
<b>Date</b> 12/24/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Faith ..... <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75287	<b>Amount of Contribution (\$)</b> \$10.00
<b>Principal occupation / Job title (See Instructions)</b> Analyst		<b>Employer (See Instructions)</b> PepsiCo

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 135/239 Rpt: 138/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowder, Jordan	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75024	
<b>8</b> Principal occupation / Job title (See Instructions) Risk Analyst		<b>9</b> Employer (See Instructions) Avantax Wealth Management
Date 07/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Jaime	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Plano, TX 75074	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luk, Jessica	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  San Francisco, CA 94112	
Principal occupation / Job title (See Instructions) Recruiter		Employer (See Instructions) Verkada
Date 09/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luk, Jessica	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  San Francisco, CA 94112	
Principal occupation / Job title (See Instructions) Recruiter		Employer (See Instructions) Verkada
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luk, Jessica	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  San Francisco, CA 94112	
Principal occupation / Job title (See Instructions) Recruiter		Employer (See Instructions) Verkada

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 136/239 Rpt: 139/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lundquist, Cara	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Flower Mound, TX 75022	
<b>8</b> Principal occupation / Job title (See Instructions) Hr Director		<b>9</b> Employer (See Instructions) Textron Bell
<b>Date</b> 10/23/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lusk, Fred	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Frisco, TX 75035	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> none
<b>Date</b> 10/30/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lusk, Fred	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Frisco, TX 75035	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> none
<b>Date</b> 08/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) MacLaughlin, Janette	<b>Amount of Contribution (\$)</b> \$15.00
	<b>Contributor address; City; State; Zip Code</b>  The Colony, TX 75056	
<b>Principal occupation / Job title (See Instructions)</b> Systems Technician		<b>Employer (See Instructions)</b> Lewisville Isd
<b>Date</b> 08/05/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) MacLaughlin, Janette	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  The Colony, TX 75056	
<b>Principal occupation / Job title (See Instructions)</b> Systems Technician		<b>Employer (See Instructions)</b> Lewisville Isd

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 137/239 Rpt: 140/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maclean, Leslie	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75201	
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Wkps
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mageau, Lorraine	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  San Diego, CA 92123	
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Sdccd
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maguire-Powell, Alison	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Denton, TX 76210	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maguire-Powell, Alison	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Denton, TX 76210	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maguire-Powell, Alison	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Denton, TX 76210	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 138/239 Rpt: 141/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malandruccolo, Judy	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malandruccolo, Judy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malandruccolo, Judy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marc Funderburk, Asla	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Arlington, TX 76016	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markel, Frank	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75093	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 139/239 Rpt: 142/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markel, Frank	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75093	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markel, Frank	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75093	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markel, Frank	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75093	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Floyd	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Arlington, TX 76013	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Amy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Arlington, TX 76010	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 140/239 Rpt: 143/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Kelly	<b>7</b> Amount of Contribution (\$) \$20.25
	<b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94117	
<b>8</b> Principal occupation / Job title (See Instructions) Dog Walker		<b>9</b> Employer (See Instructions) Self
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Lisa	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Pharr, TX 78577	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Fidelity National Financial
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Robert	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Leakey, TX 78873	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Robert	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Leakey, TX 78873	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Xavier	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Buda, TX 78610	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 141/239 Rpt: 144/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marziani, Mimi	<b>7</b> Amount of Contribution (\$) \$125.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78704	
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions) MSG PLLC
<b>Date</b> 08/03/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Mastenbrook, Shirley	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 07/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Mastenbrook, Shirley	<b>Amount of Contribution (\$)</b> \$42.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 10/29/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Mastenbrook, Shirley	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 12/23/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Mastenbrook, Shirley	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 142/239 Rpt: 145/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/27/2025	<b>5</b> Full name of contributor Mastenbrook, Shirley	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/09/2025	Full name of contributor Masterson, James	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  Aurora, CO 80016	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/12/2025	Full name of contributor Mathis, Hilary	Amount of Contribution (\$) \$20.25
	Contributor address; City; State; Zip Code  Alachua, FL 32615	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/16/2025	Full name of contributor Matsumoto, Shannon	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Dallas, TX 75258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/07/2025	Full name of contributor Matsumoto, Shannon	Amount of Contribution (\$) \$7.00
	Contributor address; City; State; Zip Code  Dallas, TX 75258	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 143/239 Rpt: 146/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/07/2025	<b>5</b> Full name of contributor Matsumoto, Shannon .....  <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75258	<b>7</b> Amount of Contribution (\$)  \$7.00
	<b>8</b> Principal occupation / Job title (See Instructions) Not Employed	<b>9</b> Employer (See Instructions) Not Employed
Date 09/07/2025	Full name of contributor Matsumoto, Shannon .....  Contributor address; City; State; Zip Code  Dallas, TX 75258	Amount of Contribution (\$)  \$7.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 10/07/2025	Full name of contributor Matsumoto, Shannon .....  Contributor address; City; State; Zip Code  Dallas, TX 75258	Amount of Contribution (\$)  \$7.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 11/07/2025	Full name of contributor Matsumoto, Shannon .....  Contributor address; City; State; Zip Code  Dallas, TX 75258	Amount of Contribution (\$)  \$7.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 12/07/2025	Full name of contributor Matsumoto, Shannon .....  Contributor address; City; State; Zip Code  Dallas, TX 75258	Amount of Contribution (\$)  \$7.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 144/239 Rpt: 147/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/07/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Essence ..... <b>6</b> Contributor address; City; State; Zip Code  Ruckersville, VA 22968	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>8</b> Principal occupation / Job title (See Instructions) Social Worker	<b>9</b> Employer (See Instructions) Hospice
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarr, Janie ..... Contributor address; City; State; Zip Code  Dallas, TX 75220	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy ..... Contributor address; City; State; Zip Code  Dallas, TX 75248	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) Psychologist	Employer (See Instructions) Self
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy ..... Contributor address; City; State; Zip Code  Dallas, TX 75248	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) Psychologist	Employer (See Instructions) Self
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy ..... Contributor address; City; State; Zip Code  Dallas, TX 75248	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) Psychologist	Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 145/239 Rpt: 148/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy	<b>7</b> Amount of Contribution (\$) \$1.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75248	
<b>8</b> Principal occupation / Job title (See Instructions) Psychologist		<b>9</b> Employer (See Instructions) Self
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code  Dallas, TX 75248	
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code  Dallas, TX 75248	
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code  Dallas, TX 75248	
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code  Dallas, TX 75248	
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 146/239 Rpt: 149/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarrahan, Andy	<b>7</b> Amount of Contribution (\$) \$3.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75248	
<b>8</b> Principal occupation / Job title (See Instructions) Psychologist		<b>9</b> Employer (See Instructions) Self
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuire Revocable Trust	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code  Dallas, TX 75025	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00225342) McGuire Woods Federal Fund PAC	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Richmond, VA 23219	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccage, Marleen	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccarthy, Sarah	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Park City, UT 84098	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 147/239 Rpt: 150/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCleskey, Kathie	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Baltimore, MD 21230	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClure, Bettie	Amount of Contribution (\$) \$20.25
	Contributor address; City; State; Zip Code  Bowie, MD 20720	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormick, James	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Plano, TX 75074	
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Usaa
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormick, Ray	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccrary, Anita	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Fort Worth, TX 76107	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 148/239 Rpt: 151/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgarrahan, Andy ..... <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75248	<b>7</b> Amount of Contribution (\$)  \$1.00
	<b>8</b> Principal occupation / Job title (See Instructions) Psychologist	<b>9</b> Employer (See Instructions) Self
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgarrahan, Andy ..... Contributor address; City; State; Zip Code  Dallas, TX 75248	Amount of Contribution (\$)  \$3.00
	Principal occupation / Job title (See Instructions) Psychologist	Employer (See Instructions) Self
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgarrahan, Andy ..... Contributor address; City; State; Zip Code  Dallas, TX 75248	Amount of Contribution (\$)  \$3.00
	Principal occupation / Job title (See Instructions) Psychologist	Employer (See Instructions) Self
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgarrahan, Andy ..... Contributor address; City; State; Zip Code  Dallas, TX 75248	Amount of Contribution (\$)  \$1.00
	Principal occupation / Job title (See Instructions) Psychologist	Employer (See Instructions) Self
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgovern, Katherine ..... Contributor address; City; State; Zip Code  Dallas, TX 75229	Amount of Contribution (\$)  \$50.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 149/239 Rpt: 152/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgrail, Corinne	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  Michigan City, IN 46360	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcguire, Rachel	Amount of Contribution (\$) \$170.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University Of Texas At Dallas
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcintyre, Marlene	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Suwanee, GA 30024	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Mm+ Healthcare
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mckillip, Chris	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Chicago, IL 60605	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mckown, Jane	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 150/239 Rpt: 153/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcnew, Stephen	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  Brookville, OH 45309	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melsheimer, Susan	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  Baton Rouge, LA 70817	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merrill, Walter	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Allen, TX 75002	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) KBR
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merrill, Walter	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Allen, TX 75002	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) KBR
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Kay	Amount of Contribution (\$) \$20.25
	Contributor address; City; State; Zip Code  San Antonio, TX 78230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 151/239 Rpt: 154/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Micchaelle, Maria	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Princeton, TX 75407	
<b>8</b> Principal occupation / Job title (See Instructions) Self Employed		<b>9</b> Employer (See Instructions)
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Peacock, Jason	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code  Denton, TX 76201	
Principal occupation / Job title (See Instructions) Admissions Officer		Employer (See Instructions) Univ Of North Texas
Date 08/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Peacock, Jason	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code  Denton, TX 76201	
Principal occupation / Job title (See Instructions) Admissions Officer		Employer (See Instructions) Univ Of North Texas
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Peacock, Jason	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code  Denton, TX 76201	
Principal occupation / Job title (See Instructions) Admissions Officer		Employer (See Instructions) Univ of North Texas
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Peacock, Jason	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code  Denton, TX 76201	
Principal occupation / Job title (See Instructions) Admissions Officer		Employer (See Instructions) Univ of North Texas

## MONETARY POLITICAL CONTRIBUTIONS

## **SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 152/239 Rpt: 155/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 11/25/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Peacock, Jason  <b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76201	<b>7</b> Amount of Contribution (\$) \$27.00
<b>8</b> Principal occupation / Job title (See Instructions) Admissions Officer		<b>9</b> Employer (See Instructions) Univ of North Texas
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michaud, John-Paul  Contributor address; City; State; Zip Code  Hays, KS 67601	Amount of Contribution (\$) \$1.67
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) K-State U
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michels, Linda  Contributor address; City; State; Zip Code  Atascadero, CA 93422	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Toomey & Associates  Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milkes, Joe  Contributor address; City; State; Zip Code  Plano, TX 75025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Milkes Realty Valuation

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 153/239 Rpt: 156/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Cynthia	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Martinez, CA 94553	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Janet And Robert	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Shanley	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  San Diego, CA 92116	
Principal occupation / Job title (See Instructions) Management		Employer (See Instructions) Uc San Diego
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Steven	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Richardson, TX 75083	
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Steven Miller & Co Llc
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Thomas	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) CTO		Employer (See Instructions) Enseo

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 154/239 Rpt: 157/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller Reams, Angela	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milner, Christie	Amount of Contribution (\$) \$20.25
	Contributor address; City; State; Zip Code  Houston, TX 77096	
Principal occupation / Job title (See Instructions) Foreign Service Officer		Employer (See Instructions) Department Of State
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minuete, Joanne	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mirizzi, Matthew	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Hr Business Partner		Employer (See Instructions) Integrity
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mody, Jane	Amount of Contribution (\$) \$170.00
	Contributor address; City; State; Zip Code  Dallas, TX 75205	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 155/239 Rpt: 158/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mohl, Barbara	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mohl, Barbara	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mohl, Barbara	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mohl, Barbara	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mohl, Barbara	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 156/239 Rpt: 159/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 11/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mohl, Barbara	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montfort, Joel	Amount of Contribution (\$) \$42.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moody, Joe	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  El Paso, TX 79902	
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions) State of Texas
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bonnie	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Trophy Club, TX 76262	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, GUADAUPE	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Robstown, TX 78380	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 157/239 Rpt: 160/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/07/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Daniel	<b>7</b> Amount of Contribution (\$) \$47.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	
<b>8</b> Principal occupation / Job title (See Instructions) College Professor		<b>9</b> Employer (See Instructions) Southern Methodist University
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mott, Kenneth	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code  McKinney, TX 75069	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Chris	Amount of Contribution (\$) \$170.00
	Contributor address; City; State; Zip Code  Austin, TX 78702	
Principal occupation / Job title (See Instructions) Tech		Employer (See Instructions) Samsara
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Debbie	Amount of Contribution (\$) \$1.66
	Contributor address; City; State; Zip Code  Charlotte, NC 28277	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Microsoft
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Lyn	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  Cottonwood, CA 96022	
Principal occupation / Job title (See Instructions) Dog Trainer Dog Daycamp Owner		Employer (See Instructions) Self-Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 158/239 Rpt: 161/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Therese	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  Chicago, IL 60657	
<b>8</b> Principal occupation / Job title (See Instructions) RN		<b>9</b> Employer (See Instructions) Self
Date 10/23/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00366559) NRG Energy PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Navarro, Barbara	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Magnolia, TX 77355	
Principal occupation / Job title (See Instructions) Social work		Employer (See Instructions) Harris County
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neely, Robert	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Plano, TX 75074	
Principal occupation / Job title (See Instructions) Rehabilitation Aide		Employer (See Instructions) Select Medical
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Deb	Amount of Contribution (\$) \$20.25
	Contributor address; City; State; Zip Code  Hanover, NH 03755	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 159/239 Rpt: 162/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Therese	<b>7</b> Amount of Contribution (\$) \$8.20
	<b>6</b> Contributor address; City; State; Zip Code  Chicago, IL 60615	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nimerala, Natalie	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  Chicago, IL 60622	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hire Counsel
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noble, Greta	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nogueras, Maggie	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Universal City, TX 78148	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Normann, Charles	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code  Georgetown, TX 78626	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 160/239 Rpt: 163/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norwood M.D., Patricia	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78209	
<b>8</b> Principal occupation / Job title (See Instructions) physician		<b>9</b> Employer (See Instructions) self
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nunns, Alice Lynn	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Richardson, TX 75080	
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#: _____) ONCOR Texas State PAC	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code  Dallas, TX 75202	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Reilly, Deborah	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Plano ISD
Date 10/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Reilly, Deborah	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Plano ISD

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 161/239 Rpt: 164/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 11/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Reilly, Deborah	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75025	
<b>8</b> Principal occupation / Job title (See Instructions) teacher		<b>9</b> Employer (See Instructions) Plano ISD
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Reilly, Deborah	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Frisco, TX 75036	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oberhof, Donica	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  San Antonio, TX 78258	
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obets, Russell	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Support Engineer		Employer (See Instructions) Amazon Web Services
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obets, Russell	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Support Engineer		Employer (See Instructions) Amazon Web Services

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 162/239 Rpt: 165/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ohland, Karen J.	<b>7</b> Amount of Contribution (\$) \$3.00
	<b>6</b> Contributor address; City; State; Zip Code  Lawrenceville, NJ 08648	
<b>8</b> Principal occupation / Job title (See Instructions) Associate Director		<b>9</b> Employer (See Instructions) Princeton University
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oldner, Cissy	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code  Mckinney, TX 75070	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oldner, Cissy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Mckinney, TX 75070	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshrain, Mindy	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Durham, NC 27705	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ouzillou, Yael	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Austin, TX 78704	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Y'all Collaborative

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 163/239 Rpt: 166/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owen, Jennifer	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75214	
<b>8</b> Principal occupation / Job title (See Instructions) attorney		<b>9</b> Employer (See Instructions) Higier Allen & Lautin PC
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ozarow, Meaders	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Dallas, TX 75209	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Empire Baking Co
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ozarow, Meaders	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Dallas, TX 75209	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Empire Baking Co
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) P Hudak, Sharon	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Music Instructor		Employer (See Instructions) Music & Arts
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAC of the Independent Insurance Agents of Texas	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Austin, TX 78768	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 164/239 Rpt: 167/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Panicker, Aradhana	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Vickie	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Richardson, TX 75082	
Principal occupation / Job title (See Instructions) Occupational Therapist		Employer (See Instructions) Self
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Vickie	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Richardson, TX 75082	
Principal occupation / Job title (See Instructions) Occupational Therapist		Employer (See Instructions) Self
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Vickie	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Richardson, TX 75082	
Principal occupation / Job title (See Instructions) Occupational therapist		Employer (See Instructions) Self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Vickie	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Richardson, TX 75082	
Principal occupation / Job title (See Instructions) Occupational therapist		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 165/239 Rpt: 168/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)			<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 11/01/2025	<b>5</b> Full name of contributor Parker, Vickie .....  <b>6</b> Contributor address; City; State; Zip Code  Richardson, TX 75082	<b>7</b> Amount of Contribution (\$)  \$50.00	
<b>8</b> Principal occupation / Job title (See Instructions) Occupational Therapist		<b>9</b> Employer (See Instructions) Self	
Date 11/24/2025	Full name of contributor Parker, Vickie .....  Contributor address; City; State; Zip Code  Richardson, TX 75082	Amount of Contribution (\$)  \$17.00	
Principal occupation / Job title (See Instructions) Occupational therapist		Employer (See Instructions) Self	
Date 12/24/2025	Full name of contributor Parker, Vickie .....  Contributor address; City; State; Zip Code  Richardson, TX 75082	Amount of Contribution (\$)  \$17.00	
Principal occupation / Job title (See Instructions) Occupational therapist		Employer (See Instructions) Self	
Date 08/16/2025	Full name of contributor Parsell, Brenna .....  Contributor address; City; State; Zip Code  Plano, TX 75023	Amount of Contribution (\$)  \$10.00	
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Self	
Date 11/19/2025	Full name of contributor Pashs, Parveen .....  Contributor address; City; State; Zip Code  Plano, TX 75024	Amount of Contribution (\$)  \$17.00	
Principal occupation / Job title (See Instructions) TP Cybersecurity Assessor		Employer (See Instructions) Bank of America	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 166/239 Rpt: 169/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/22/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, James ..... <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>8</b> Principal occupation / Job title (See Instructions) Attorney	<b>9</b> Employer (See Instructions) Spencer Fane
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, James ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$47.00
	Principal occupation / Job title (See Instructions) Attorney	Employer (See Instructions) Spencer Fane
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, James ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$70.00
	Principal occupation / Job title (See Instructions) Attorney	Employer (See Instructions) Spencer Fane
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, James ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$47.00
	Principal occupation / Job title (See Instructions) Attorney	Employer (See Instructions) Spencer Fane
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, James ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Attorney	Employer (See Instructions) SpencerFane

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 167/239 Rpt: 170/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, James	<b>7</b> Amount of Contribution (\$) \$70.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Spencer Fane
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pattillo, Amy	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Austin, TX 78746	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patula, Ryan	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Chicago, IL 60614	
Principal occupation / Job title (See Instructions) Independent Consultant		Employer (See Instructions) Self
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pawenski, Joelyn	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Canton, MI 48187	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pawenski, Joelyn	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Canton, MI 48187	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 168/239 Rpt: 171/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/15/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Pamela ..... <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78702	<b>7</b> Amount of Contribution (\$) \$1,250.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Stephen ..... Contributor address; City; State; Zip Code  Miami, FL 33156	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self Employed
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pedersen, Bill ..... Contributor address; City; State; Zip Code  Dallas, TX 75228	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions) Fifth Court of Appeals
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena, Cristella ..... Contributor address; City; State; Zip Code  Austin, TX 78754	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Speech Language Pathologist		Employer (See Instructions) Pflugerville Isd
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Lindsey ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Marketing Director		Employer (See Instructions) Plug In America

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 169/239 Rpt: 172/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perovich, Kelela  <b>6</b> Contributor address; City; State; Zip Code  Euless, TX 76039	<b>7</b> Amount of Contribution (\$) \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Payroll		<b>9</b> Employer (See Instructions) Michaels
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Craig  Contributor address; City; State; Zip Code  Plano, TX 75093	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Katherine  Contributor address; City; State; Zip Code  Plano, TX 75025	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Cytiva
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perryman, Chance  Contributor address; City; State; Zip Code  Navasota, TX 77868	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) GM		Employer (See Instructions) Lspm
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Susan  Contributor address; City; State; Zip Code  Mckinney, TX 75071	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 170/239 Rpt: 173/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/05/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Gary	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75024	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Gary	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Plano, TX 75024-7347	\$47.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Gary	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Plano, TX 75024-7347	\$17.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Physicians for Free Market Healthcare	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Dallas, TX 75205	\$15,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Gretchen	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Austin, TX 78704	\$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

## MONETARY POLITICAL CONTRIBUTIONS

## **SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 171/239 Rpt: 174/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pineda, Angela <b>6</b> Contributor address; City; State; Zip Code  Carrollton, TX 75007	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Lease Administrator		<b>9</b> Employer (See Instructions) Cinemark
<b>Date</b> 08/03/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Pineda, Roberto <b>Contributor address; City; State; Zip Code</b>  Frisco, TX 75035	<b>Amount of Contribution (\$)</b>  \$47.00
Principal occupation / Job title (See Instructions) Software Programmer		Employer (See Instructions) Intuit
<b>Date</b> 08/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinkerton, Heidi <b>Contributor address; City; State; Zip Code</b>  San Antonio, TX 78223	<b>Amount of Contribution (\$)</b>  \$25.00
Principal occupation / Job title (See Instructions) SLP		Employer (See Instructions) Brighton
<b>Date</b> 08/09/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Piotrowski, Kathryn <b>Contributor address; City; State; Zip Code</b>  Chicago, IL 60614	<b>Amount of Contribution (\$)</b>  \$100.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Kirkland & Ellis
<b>Date</b> 07/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Plonka, Susan <b>Contributor address; City; State; Zip Code</b>  Plano, TX 75093	<b>Amount of Contribution (\$)</b>  \$35.00
Principal occupation / Job title (See Instructions) Security Engineer		Employer (See Instructions) Yum! Brands

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 172/239 Rpt: 175/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/09/2025	<b>5</b> Full name of contributor Poncz, Louis	<b>7</b> Amount of Contribution (\$) \$18.00
	<b>6</b> Contributor address; City; State; Zip Code  Redmond, WA 98053	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
<b>Date</b> 08/11/2025	<b>Full name of contributor</b> Pope, Olga	<b>Amount of Contribution (\$)</b> \$47.00
	<b>Contributor address; City; State; Zip Code</b>  Richardson, TX 75080	
<b>Principal occupation / Job title (See Instructions)</b> Engineer		<b>Employer (See Instructions)</b> TI
<b>Date</b> 08/14/2025	<b>Full name of contributor</b> Potter, Lisa	<b>Amount of Contribution (\$)</b> \$47.00
	<b>Contributor address; City; State; Zip Code</b>  San Antonio, TX 78253	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 08/11/2025	<b>Full name of contributor</b> Powers, Cyndi	<b>Amount of Contribution (\$)</b> \$5.55
	<b>Contributor address; City; State; Zip Code</b>  Austin, TX 78723	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 09/24/2025	<b>Full name of contributor</b> Prentice, cara	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 173/239 Rpt: 176/291	
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010	
<b>4</b> Date 10/24/2025	<b>5</b> Full name of contributor Prentice, cara	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	<b>7</b> Amount of Contribution (\$)  \$20.00
	<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		
<b>9</b> Employer (See Instructions) Not Employed	<b>9</b> Employer (See Instructions) Not Employed		
	<b>Date</b> 11/24/2025	<b>Full name of contributor</b> Prentice, cara	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed	
<b>Date</b> 12/24/2025	<b>Full name of contributor</b> Prentice, cara	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	<b>Amount of Contribution (\$)</b>  \$20.00
	<b>Principal occupation / Job title (See Instructions)</b> Not Employed		
<b>Date</b> 07/28/2025	<b>Full name of contributor</b> Price, Lance	<b>Contributor address; City; State; Zip Code</b>  Addison, TX 75001	<b>Amount of Contribution (\$)</b>  \$42.00
	<b>Principal occupation / Job title (See Instructions)</b> Owner		
<b>Date</b> 08/31/2025	<b>Full name of contributor</b> Price, Lance	<b>Contributor address; City; State; Zip Code</b>  Addison, TX 75001	<b>Amount of Contribution (\$)</b>  \$25.00
	<b>Principal occupation / Job title (See Instructions)</b> Owner		

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 174/239 Rpt: 177/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Lance	<b>7</b> Amount of Contribution (\$) \$58.00
	<b>6</b> Contributor address; City; State; Zip Code  Addison, TX 75001	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Cd Source
<b>Date</b> 09/30/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Lance	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Addison, TX 75001	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> CD Source
<b>Date</b> 10/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Lance	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Addison, TX 75001	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> CD Source
<b>Date</b> 11/30/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Lance	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Addison, TX 75001	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> CD Source
<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Lance	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Addison, TX 75001	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> CD Source

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 175/239 Rpt: 178/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pritchard, Kellye	<b>7</b> Amount of Contribution (\$) \$17.00
	<b>6</b> Contributor address; City; State; Zip Code  Richardson, TX 75083	
<b>8</b> Principal occupation / Job title (See Instructions) Marketing		<b>9</b> Employer (See Instructions) Self
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Provencher, Denise	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Provencher, Denise	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pruitt, Alethea	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Arlington, TX 76016	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pucker, Maggie	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Chicago, IL 60606	
Principal occupation / Job title (See Instructions) Social Work		Employer (See Instructions) Hospital

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 176/239 Rpt: 179/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/10/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purkayastha, Subir	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75023	
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions) Brooksource
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purkayastha, Subir	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Eight Eleven
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pursell, Tracy	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code  Kalispell, MT 59901	
Principal occupation / Job title (See Instructions) Qc/Data Specialist		Employer (See Instructions) New Solutions
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Putz, Sarah Jane	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Kirkland, WA 98033	
Principal occupation / Job title (See Instructions) Student Services Counselor		Employer (See Instructions) UW
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, John	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Allen, TX 75013	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 177/239 Rpt: 180/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)			<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quittner, Claudia	<b>7</b> Amount of Contribution (\$) \$36.00	
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252		
<b>8</b> Principal occupation / Job title (See Instructions) Research Nurse		<b>9</b> Employer (See Instructions) UTSWMC	
<b>Date</b> 07/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Raiser, M Carolyn	<b>Amount of Contribution (\$)</b> \$17.00	
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75287		
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired	
<b>Date</b> 07/01/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Carmen	<b>Amount of Contribution (\$)</b> \$15.00	
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75230		
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed	
<b>Date</b> 08/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramos, Margarita	<b>Amount of Contribution (\$)</b> \$10.00	
	<b>Contributor address; City; State; Zip Code</b>  Austin, TX 78704		
<b>Principal occupation / Job title (See Instructions)</b> Project Manager		<b>Employer (See Instructions)</b> St. Edwards University	
<b>Date</b> 08/09/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Rao, Rashmi	<b>Amount of Contribution (\$)</b> \$47.00	
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75025		
<b>Principal occupation / Job title (See Instructions)</b> Software Engineer		<b>Employer (See Instructions)</b> At&T	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 178/239 Rpt: 181/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 11/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ratliff, Bennett ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75086	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Civil Engineer		<b>9</b> Employer (See Instructions) The Ratliff Group LLC
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rawlins, Diana ..... Contributor address; City; State; Zip Code  Richardson, TX 75080	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retiree		Employer (See Instructions) Retired
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rawlins, Diana ..... Contributor address; City; State; Zip Code  Richardson, TX 75080	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retiree		Employer (See Instructions) Retired
Date 08/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rawlins, Diana ..... Contributor address; City; State; Zip Code  Richardson, TX 75080	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retiree		Employer (See Instructions) Retired
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rawlins, Diana ..... Contributor address; City; State; Zip Code  Richardson, TX 75080	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retiree		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 179/239 Rpt: 182/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rawlins, Diana	<b>7</b> Amount of Contribution (\$) \$30.00
	<b>6</b> Contributor address; City; State; Zip Code  Richardson, TX 75080	
<b>8</b> Principal occupation / Job title (See Instructions) Retiree		<b>9</b> Employer (See Instructions) not employed
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rawlins, Diana	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Richardson, TX 75080	
Principal occupation / Job title (See Instructions) Retiree		Employer (See Instructions) not employed
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rawlins, Diana	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code  Richardson, TX 75080	
Principal occupation / Job title (See Instructions) Retiree		Employer (See Instructions) not employed
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rawlins, Diana	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Richardson, TX 75080	
Principal occupation / Job title (See Instructions) Retiree		Employer (See Instructions) not employed
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rawlins, Diana	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code  Richardson, TX 75080	
Principal occupation / Job title (See Instructions) Retiree		Employer (See Instructions) not employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 180/239 Rpt: 183/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rawlins, Diana ..... <b>6</b> Contributor address; City; State; Zip Code  Richardson, TX 75080	<b>7</b> Amount of Contribution (\$) \$30.00
<b>8</b> Principal occupation / Job title (See Instructions) Retiree		<b>9</b> Employer (See Instructions) not employed
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rawlins, Diana ..... Contributor address; City; State; Zip Code  Richardson, TX 75080	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Retiree		Employer (See Instructions) not employed
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rawlins, Michael C ..... Contributor address; City; State; Zip Code  Richardson, TX 75080	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Retired
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rawlins, Michael C ..... Contributor address; City; State; Zip Code  Richardson, TX 75080-1962	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Retired
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reilly, Seth ..... Contributor address; City; State; Zip Code  Chicago, IL 60614	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) At Properties

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 181/239 Rpt: 184/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reilly, Seth	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Chicago, IL 60614	
<b>8</b> Principal occupation / Job title (See Instructions) Realtor		<b>9</b> Employer (See Instructions) @Properties
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reinke-Walter, Pam	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Dallas, TX 75252	\$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reinke-Walter, Pam	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Dallas, TX 75252	\$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reinke-Walter, Pam	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Dallas, TX 75252	\$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reinke-Walter, Pam	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Dallas, TX 75252	\$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 182/239 Rpt: 185/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Elizabeth	<b>7</b> Amount of Contribution (\$) \$17.00
	<b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76114	
<b>8</b> Principal occupation / Job title (See Instructions) Accounting Specialists		<b>9</b> Employer (See Instructions) Ach Child & Family Services
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Terri	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Dallas, TX 75287	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Lightstone
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Terri	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Dallas, TX 75287	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Lightstone
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Jennifer	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Hr Manager		Employer (See Instructions) Accenture
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Carol	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  Manchester, NH 03104	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 183/239 Rpt: 186/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/07/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ripley, Keith	<b>7</b> Amount of Contribution (\$) \$70.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75023	
<b>8</b> Principal occupation / Job title (See Instructions) Software Developer		<b>9</b> Employer (See Instructions) SAP
<b>Date</b> 08/06/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert, Barrese	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75252	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>
<b>Date</b> 08/09/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Cheryl	<b>Amount of Contribution (\$)</b> \$21.00
	<b>Contributor address; City; State; Zip Code</b>  Richardson, TX 75082	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 08/16/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Neil	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75023	
<b>Principal occupation / Job title (See Instructions)</b> Executive Director Planning And Campaign Marketing		<b>Employer (See Instructions)</b> Southern Methodist University
<b>Date</b> 07/16/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Neil	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75023	
<b>Principal occupation / Job title (See Instructions)</b> Executive Director Planning And Campaign Marketing		<b>Employer (See Instructions)</b> Southern Methodist University

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 184/239 Rpt: 187/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Neil ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75023-3652	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>8</b> Principal occupation / Job title (See Instructions) Executive director planning and campaign marketing	<b>9</b> Employer (See Instructions) Southern Methodist University
<b>Date</b> 10/16/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Neil ..... <b>Contributor address; City; State; Zip Code</b>  Plano, TX 75023-3652	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Principal occupation / Job title (See Instructions)</b> Executive director planning and campaign marketing	<b>Employer (See Instructions)</b> Southern Methodist University
<b>Date</b> 11/16/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Neil ..... <b>Contributor address; City; State; Zip Code</b>  Plano, TX 75023-3652	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Principal occupation / Job title (See Instructions)</b> Executive director planning and campaign marketing	<b>Employer (See Instructions)</b> Southern Methodist University
<b>Date</b> 12/16/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Neil ..... <b>Contributor address; City; State; Zip Code</b>  Plano, TX 75023-3652	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Principal occupation / Job title (See Instructions)</b> Executive director planning and campaign marketing	<b>Employer (See Instructions)</b> Southern Methodist University
<b>Date</b> 10/30/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) RobinsonLewis, Meril ..... <b>Contributor address; City; State; Zip Code</b>  Plano, TX 75025	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Principal occupation / Job title (See Instructions)</b> Not Employed	<b>Employer (See Instructions)</b> Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 185/239 Rpt: 188/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Betty ..... <b>6</b> Contributor address; City; State; Zip Code  Mckinney, TX 75069	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodine, Richard ..... Contributor address; City; State; Zip Code  Dallas, TX 75201	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodine, Richard ..... Contributor address; City; State; Zip Code  Dallas, TX 75201	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodman, Pamela ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodman, Pamela ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 186/239 Rpt: 189/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Gerardo	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78240	
<b>8</b> Principal occupation / Job title (See Instructions) Nurse		<b>9</b> Employer (See Instructions) Geo Group
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Michael	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Dallas, TX 75229	
Principal occupation / Job title (See Instructions) Driver		Employer (See Instructions) Ups/Retired
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rollins, Ashley	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Allen, TX 75002	
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self Employed
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romero-Malik, Elisa	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Plano, TX 75024	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rooke, Susan	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 187/239 Rpt: 190/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rooke, Susan ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75023	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>8</b> Principal occupation / Job title (See Instructions) Retired	<b>9</b> Employer (See Instructions) Retired
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rooke, Susan ..... Contributor address; City; State; Zip Code  Plano, TX 75023	Amount of Contribution (\$) \$47.00
	Principal occupation / Job title (See Instructions) Not employed	Employer (See Instructions) Not employed
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rooke, Susan ..... Contributor address; City; State; Zip Code  Plano, TX 75023	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Not employed	Employer (See Instructions) Not employed
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rooke, Susan ..... Contributor address; City; State; Zip Code  Plano, TX 75023	Amount of Contribution (\$) \$25.00
	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#: _____) Rosen, Barry ..... Contributor address; City; State; Zip Code  Stormville, NY 12582	Amount of Contribution (\$) \$2.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 188/239 Rpt: 191/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)			<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rossouw, Marc	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>8</b> Principal occupation / Job title (See Instructions) Financial Advisor		
<b>9</b> Employer (See Instructions) Edward Jones	<b>8</b> Principal occupation / Job title (See Instructions) Financial Advisor		
	<b>9</b> Employer (See Instructions) Edward Jones		
<b>Date</b> 08/06/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Rothstein, Susan	<b>Contributor address; City; State; Zip Code</b>  Brookline, MA 02445	<b>Amount of Contribution (\$)</b> \$1.00
	<b>Principal occupation / Job title (See Instructions)</b> Realtor		
<b>Employer (See Instructions)</b> Hammond Real Estate			<b>Amount of Contribution (\$)</b> \$1.00
<b>Date</b> 12/29/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Royal, Pamela	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75024	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Principal occupation / Job title (See Instructions)</b> Not Employed		
<b>Employer (See Instructions)</b> Not Employed			<b>Amount of Contribution (\$)</b> \$100.00
<b>Date</b> 09/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Rucker-Schmidt, Rachel	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75225	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Principal occupation / Job title (See Instructions)</b> Pathologist		
<b>Employer (See Instructions)</b> MD Pathology			<b>Amount of Contribution (\$)</b> \$500.00
<b>Date</b> 08/04/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Rushing, Debra	<b>Contributor address; City; State; Zip Code</b>  Sherman, TX 75092	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Principal occupation / Job title (See Instructions)</b> Retired		
<b>Employer (See Instructions)</b> Retired			<b>Amount of Contribution (\$)</b> \$10.00

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 189/239 Rpt: 192/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert	<b>7</b> Amount of Contribution (\$) \$47.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78731	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Austin, TX 78731	\$47.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Austin, TX 78731	\$70.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Austin, TX 78731	\$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutishauser, Robert	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Austin, TX 78731	\$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 190/239 Rpt: 193/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/13/2025	<b>5</b> Full name of contributor Ryan, Chris	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Chicago, IL 60614	
<b>8</b> Principal occupation / Job title (See Instructions) Finance		<b>9</b> Employer (See Instructions) Allstate
Date 08/08/2025	Full name of contributor Rypl, Joseph	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Plano, TX 75024	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/04/2025	Full name of contributor SCHENCK, GARRETT M	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/13/2025	Full name of contributor Saadati, Sylvia	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  Oak Island, NC 28465	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/28/2025	Full name of contributor Sanders, Nancy	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Dallas, TX 75229	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 191/239 Rpt: 194/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandland, Ian	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75025	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Satterthwaite, Gwendolyn	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Dallas, TX 75287	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Satterthwaite, Gwendolyn	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Dallas, TX 75287	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Satterthwaite, Gwendolyn	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Dallas, TX 75287	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saulnier, Vicki	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 192/239 Rpt: 195/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaller, Courtney ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	<b>7</b> Amount of Contribution (\$) \$17.00
<b>8</b> Principal occupation / Job title (See Instructions) Data Analyst		<b>9</b> Employer (See Instructions) Toyota Financial Services
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenck, Garrett M ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlueter, Susan ..... Contributor address; City; State; Zip Code  Denton, TX 76207	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwalm, Robert ..... Contributor address; City; State; Zip Code  Plano, TX 75093	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwalm, Robert ..... Contributor address; City; State; Zip Code  Plano, TX 75093	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 193/239 Rpt: 196/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sclar, Maxine	<b>7</b> Amount of Contribution (\$) \$170.00
	<b>6</b> Contributor address; City; State; Zip Code  Portland, ME 04101	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Segall, Ron	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Sales - Manufacturers Rep		Employer (See Instructions) Self
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Segall, Ronald	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Segall, Ronald	Amount of Contribution (\$) \$66.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Manufacturers Representative		Employer (See Instructions) Ron Segall
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Segall, Ronald	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Manufacturers Rep.		Employer (See Instructions) Self

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 194/239 Rpt: 197/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seigrist, Steven ..... <b>6</b> Contributor address; City; State; Zip Code  Euless, TX 76040	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>8</b> Principal occupation / Job title (See Instructions) Airline Pilot	<b>9</b> Employer (See Instructions) Envoy Air
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Greg ..... Contributor address; City; State; Zip Code  Austin, TX 78741	Amount of Contribution (\$) \$7.00
	Principal occupation / Job title (See Instructions) civil service	Employer (See Instructions) Internal Revenue Service
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sethi, Pooja ..... Contributor address; City; State; Zip Code  Austin, TX 78730	Amount of Contribution (\$) \$125.00
	Principal occupation / Job title (See Instructions) Attorney	Employer (See Instructions) Texas
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shah, Julie ..... Contributor address; City; State; Zip Code  Austin, TX 78746	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions) CFO	Employer (See Instructions) Eagle Bay Advisors LLC
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shamburger, Cristan ..... Contributor address; City; State; Zip Code  Richardson, TX 75081	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) JP 3-1 Chief Clerk	Employer (See Instructions) Dallas County

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 195/239 Rpt: 198/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shapard, Patricia	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76137	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Jacqueline L	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Flower Mound, TX 75028	
Principal occupation / Job title (See Instructions) Director Child Care		Employer (See Instructions) Self employed
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, John	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Seattle, WA 98117	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Tom	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  San Jose, CA 95126	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shenoy, Rekha	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Prism Health Care

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 196/239 Rpt: 199/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shewmake, Sharon	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Bellingham, WA 98225	
<b>8</b> Principal occupation / Job title (See Instructions) Senator		<b>9</b> Employer (See Instructions) Washington State Legislature
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shook, Laurie	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Murphy, TX 75094	
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Opentext
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Showers, Ryan	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Emgineer		Employer (See Instructions) Vinson
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shub, Samantha	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shupe, Desiree	Amount of Contribution (\$) \$20.25
	Contributor address; City; State; Zip Code  Fayetteville, NC 28304	
Principal occupation / Job title (See Instructions) Tattooer		Employer (See Instructions) Desiree Shupe

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 197/239 Rpt: 200/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sichler, Megan	<b>7</b> Amount of Contribution (\$) \$20.25
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78748	
<b>8</b> Principal occupation / Job title (See Instructions) Technical Product Manager		<b>9</b> Employer (See Instructions) Cisco
<b>Date</b> 08/30/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sidon, Gregory	<b>Amount of Contribution (\$)</b> \$47.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75023	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 08/13/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegel, Naomi	<b>Amount of Contribution (\$)</b> \$1.00
	<b>Contributor address; City; State; Zip Code</b>  Pittsburgh, PA 15238	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired
<b>Date</b> 10/23/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Ada	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  McKinney, TX 75071	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 08/13/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Dave	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  River Forest, IL 60305	
<b>Principal occupation / Job title (See Instructions)</b> Ad Sales		<b>Employer (See Instructions)</b> Viant

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 198/239 Rpt: 201/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Julia	<b>7</b> Amount of Contribution (\$) \$1,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75205	
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Morgan Lewis
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Yasmin	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Dallas, TX 75205	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morgan Lewis
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sims, Randall	Amount of Contribution (\$) \$20.25
	Contributor address; City; State; Zip Code  Allen, TX 75002	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skovlund, Sarah	Amount of Contribution (\$) \$7.50
	Contributor address; City; State; Zip Code  East Palo Alto, CA 94303	
Principal occupation / Job title (See Instructions) Nursing Assistant		Employer (See Instructions) Self
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smart, Pat	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Abilene, TX 79605	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 199/239 Rpt: 202/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snowden, Jo'anna	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75025	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solis, Michelle	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Organizer		Employer (See Instructions) Self
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solomon, Debora	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Frisco, TX 75034	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sosa, Estela	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Harlingen, TX 78550	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) VCB
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soto, Griselle	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Austin, TX 78746	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

## MONETARY POLITICAL CONTRIBUTIONS

## **SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 200/239 Rpt: 203/291
<b>2</b> FILER NAME  Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/04/2025	<b>5</b> Full name of contributor Soulakis, Theodore  <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	<b>7</b> Amount of Contribution (\$)  \$17.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/11/2025	Full name of contributor Spinell, Gary  Contributor address; City; State; Zip Code  Mckinney, TX 75072	Amount of Contribution (\$)  \$47.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/01/2025	Full name of contributor Spinell, Michelle  Contributor address; City; State; Zip Code  Mckinney, TX 75070	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/03/2025	Full name of contributor Sprinkel, Elizabeth  Contributor address; City; State; Zip Code  Plano, TX 75074	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor Stark, John  Contributor address; City; State; Zip Code  Plano, TX 75025	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Sales Assistant		Employer (See Instructions) Highland Homes

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 201/239 Rpt: 204/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)			<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, John	<b>7</b> Amount of Contribution (\$) \$17.00	
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75025		
<b>8</b> Principal occupation / Job title (See Instructions) Sales Assistant		<b>9</b> Employer (See Instructions) Highland Homes	
<b>Date</b> 08/04/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon	<b>Amount of Contribution (\$)</b> \$17.00	
	<b>Contributor address; City; State; Zip Code</b>  Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
<b>Date</b> 09/20/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon	<b>Amount of Contribution (\$)</b> \$17.00	
	<b>Contributor address; City; State; Zip Code</b>  Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed	
<b>Date</b> 08/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Stacy	<b>Amount of Contribution (\$)</b> \$70.00	
	<b>Contributor address; City; State; Zip Code</b>  Carlisle, KY 40311		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
<b>Date</b> 12/23/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Stead, Erica	<b>Amount of Contribution (\$)</b> \$50.00	
	<b>Contributor address; City; State; Zip Code</b>  Newton, IL 62448		
Principal occupation / Job title (See Instructions) Game development		Employer (See Instructions) Gearbox Software	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 202/239 Rpt: 205/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stebbins, Elaine	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75093	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Deborah	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Spring, TX 77381	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Margie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Margie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stein, Pamela	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Dallas, TX 75205	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 203/239 Rpt: 206/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)			<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/01/2025	<b>5</b> Full name of contributor Stelzenmuller, Keith .....  <b>6</b> Contributor address; City; State; Zip Code  Allen, TX 75002	<b>7</b> Amount of Contribution (\$)  \$70.00	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed	
Date 08/08/2025	Full name of contributor Stempky, Susan .....  Contributor address; City; State; Zip Code  Clawson, MI 48017	Amount of Contribution (\$)  \$5.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 12/27/2025	Full name of contributor Sterling, Karen .....  Contributor address; City; State; Zip Code  Cedar Creek, TX 78612	Amount of Contribution (\$)  \$5.00	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed	
Date 08/11/2025	Full name of contributor Stevens, Gail .....  Contributor address; City; State; Zip Code  Frisco, TX 75035	Amount of Contribution (\$)  \$10.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 08/05/2025	Full name of contributor Stevens, Gail .....  Contributor address; City; State; Zip Code  Frisco, TX 75035	Amount of Contribution (\$)  \$15.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 204/239 Rpt: 207/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Gail	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75035	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Harold	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Allen, TX 75013	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steves, Buddy	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77030	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stockard, Natalie	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  St. Petersburg, FL 33701	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokely, Ernest	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252-4929	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 205/239 Rpt: 208/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes Hilton, Lee	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78735	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Rebecca	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Plano, TX 75024	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Rebecca	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75024	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Rebecca	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Plano, TX 75024	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Rebecca	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75024	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 206/239 Rpt: 209/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Rebecca	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75024	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strop-Adams, Joan	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stucka, Daniel	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Dallas, TX 75248	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stucko, Craig	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Commack, NY 11725	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Royal Products
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Patrick	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75024	
Principal occupation / Job title (See Instructions) Controller		Employer (See Instructions) Crestmarc Residential Inc

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 207/239 Rpt: 210/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Patrick	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75024	
<b>8</b> Principal occupation / Job title (See Instructions) Controller		<b>9</b> Employer (See Instructions) Crestmarc Residential Inc
<b>Date</b> 08/03/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Patrick	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75024	
<b>Principal occupation / Job title (See Instructions)</b> Controller		<b>Employer (See Instructions)</b> Crestmarc Residential Inc
<b>Date</b> 08/14/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Patrick	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75024	
<b>Principal occupation / Job title (See Instructions)</b> Controller		<b>Employer (See Instructions)</b> Crestmarc Residential Inc
<b>Date</b> 08/26/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Patrick	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75024	
<b>Principal occupation / Job title (See Instructions)</b> Controller		<b>Employer (See Instructions)</b> Crestmarc Residential Inc
<b>Date</b> 07/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Patrick	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75024	
<b>Principal occupation / Job title (See Instructions)</b> Controller		<b>Employer (See Instructions)</b> Crestmarc Residential Inc

## MONETARY POLITICAL CONTRIBUTIONS

## **SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 208/239 Rpt: 211/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Patrick	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75024	
<b>8</b> Principal occupation / Job title (See Instructions) Controller		<b>9</b> Employer (See Instructions) CrestMarc Residential Inc
<b>Date</b> 11/18/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Patrick	<b>Amount of Contribution (\$)</b> \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75024	
Principal occupation / Job title (See Instructions) Controller		Employer (See Instructions) CrestMarc Residential Inc
<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Patrick	<b>Amount of Contribution (\$)</b> \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75024	
Principal occupation / Job title (See Instructions) Controller		Employer (See Instructions) CrestMarc Residential Inc
<b>Date</b> 08/05/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sulur, Balu	<b>Amount of Contribution (\$)</b> \$170.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
<b>Date</b> 08/09/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Szemere, Anna	<b>Amount of Contribution (\$)</b> \$20.00
	Contributor address; City; State; Zip Code  Portland, OR 97221	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

## MONETARY POLITICAL CONTRIBUTIONS

## **SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 209/239 Rpt: 212/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) T Haas, Morgan  <b>6</b> Contributor address; City; State; Zip Code  Marietta, GA 30068	<b>7</b> Amount of Contribution (\$) \$70.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Solution Foundry
<b>Date</b> 08/05/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Tabor, Kristin  <b>Contributor address; City; State; Zip Code</b>  Austin, TX 78727	<b>Amount of Contribution (\$)</b> \$47.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) St. Davids Specialized Womens Services
<b>Date</b> 11/02/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Talman, Tyler  <b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75252	<b>Amount of Contribution (\$)</b> \$50.00
Principal occupation / Job title (See Instructions) Wealth Manager		Employer (See Instructions) Carrington Group
<b>Date</b> 08/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Donna  <b>Contributor address; City; State; Zip Code</b>  Allen, TX 75013	<b>Amount of Contribution (\$)</b> \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
<b>Date</b> 07/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Tedlock, Joanne  <b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	<b>Amount of Contribution (\$)</b> \$17.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 210/239 Rpt: 213/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Land Title Association PAC .....  <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703	<b>7</b> Amount of Contribution (\$) \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Medical Association PAC .....  Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Medical Association PAC .....  Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Trial Lawyers Association PAC .....  Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thao, Ker .....  Dallas, TX 75252	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 211/239 Rpt: 214/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Larriet	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75253	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Larriet	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Dallas, TX 75253	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Larriet	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Dallas, TX 75253	
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#: _____) Thompson, Ramona	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Frisco, TX 75036	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Frisco, TX 75036	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 212/239 Rpt: 215/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/09/2025	<b>5</b> Full name of contributor Thompson, Ramona	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75036	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
<b>Date</b> 10/09/2025	<b>Full name of contributor</b> Thompson, Ramona	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  Frisco, TX 75036	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 11/09/2025	<b>Full name of contributor</b> Thompson, Ramona	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  Frisco, TX 75036	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 12/09/2025	<b>Full name of contributor</b> Thompson, Ramona	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  Frisco, TX 75036	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 08/11/2025	<b>Full name of contributor</b> Thompson, Sandy	<b>Amount of Contribution (\$)</b> \$20.25
	<b>Contributor address; City; State; Zip Code</b>  Beaumont, TX 77706	
<b>Principal occupation / Job title (See Instructions)</b> Civil/Structural Designer		<b>Employer (See Instructions)</b> Burrow Global Services

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 213/239 Rpt: 216/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 11/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thornton, Wendelyn	<b>7</b> Amount of Contribution (\$) \$17.00
	<b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78232	
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torn, Linda	Amount of Contribution (\$) \$36.00
	Contributor address; City; State; Zip Code  Los Angeles, CA 90031	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Andrew	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code  Santa Monica, CA 90404	
Principal occupation / Job title (See Instructions) Legal Assistant		Employer (See Instructions) Law Office Of Michael Shilub
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Elizabeth	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Research		Employer (See Instructions) UTH
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toubin, Jimmy	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 214/239 Rpt: 217/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/08/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trible, Wiltz ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75024	<b>7</b> Amount of Contribution (\$) \$70.00
<b>8</b> Principal occupation / Job title (See Instructions) Usher		<b>9</b> Employer (See Instructions) Stadium People
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Truitt, Janice ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Truitt, Janice ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Truitt, Janice ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Truitt, Janice ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 215/239 Rpt: 218/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/22/2025	<b>5</b> Full name of contributor Truitt, Janice	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
<b>Date</b> 11/22/2025	<b>Full name of contributor</b> Truitt, Janice	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 12/22/2025	<b>Full name of contributor</b> Truitt, Janice	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 08/05/2025	<b>Full name of contributor</b> Tullo, Debra	<b>Amount of Contribution (\$)</b> \$15.00
	<b>Contributor address; City; State; Zip Code</b>  Gilbert, AZ 85298	
<b>Principal occupation / Job title (See Instructions)</b> Customer Service		<b>Employer (See Instructions)</b> Pylam
<b>Date</b> 07/20/2025	<b>Full name of contributor</b> Turner, Sue	<b>Amount of Contribution (\$)</b> \$30.00
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75252	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 216/239 Rpt: 219/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Sue	<b>7</b> Amount of Contribution (\$) \$30.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Sue	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Dallas, TX 75252	\$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Sue	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Dallas, TX 75252	\$47.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Sue	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Dallas, TX 75252	\$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Sue	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Dallas, TX 75252	\$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 217/239 Rpt: 220/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/06/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Sue	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Sue	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turpin, James	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Telecommunications Engineer		Employer (See Instructions) Solid Gear
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler, Sarah	Amount of Contribution (\$) \$270.00
	Contributor address; City; State; Zip Code  Houston, TX 77079	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vander Linden, Paul	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 218/239 Rpt: 221/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/23/2025	<b>5</b> Full name of contributor Vander Linden, Paul	<b>7</b> Amount of Contribution (\$) \$35.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/27/2025	Full name of contributor Vander Linden, Paul	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/03/2025	Full name of contributor Vasquez, Dannette	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Austin, TX 78745	
Principal occupation / Job title (See Instructions) Senior Technical Support		Employer (See Instructions) Apple
Date 07/19/2025	Full name of contributor Vaughn, Goebel	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/04/2025	Full name of contributor Velasquez, Michelle	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Jpmorgan Chase

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 219/239 Rpt: 222/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/27/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal & Begum ..... <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 78526	<b>7</b> Amount of Contribution (\$) \$10,000.00
	<b>8</b> Principal occupation / Job title (See Instructions) <b>9</b> Employer (See Instructions)	
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Jordan ..... Contributor address; City; State; Zip Code  Denton, TX 76208	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) <b>Employer (See Instructions)</b> Consultant Self	
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vines, Joe ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) <b>Employer (See Instructions)</b> Not Employed Not Employed	
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vines, Jor ..... Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) <b>Employer (See Instructions)</b> Retired Retired	
Date 10/02/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00226548) Vistra Employee PAC of Vistra Corp ..... Contributor address; City; State; Zip Code  Irving, TX 75039	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) <b>Employer (See Instructions)</b>	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 220/239 Rpt: 223/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vo, Hubert (The Honorable)	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77071	
<b>8</b> Principal occupation / Job title (See Instructions) State Representative		<b>9</b> Employer (See Instructions) State of Texas
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vogel, Steve	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Master Jeweler		Employer (See Instructions) Jpratt Designs
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Donna	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Dallas, TX 75287	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Donna	Amount of Contribution (\$) \$42.00
	Contributor address; City; State; Zip Code  Dallas, TX 75287	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, William	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  Dublin, OH 43017	
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) William Walker

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 221/239 Rpt: 224/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh, Suzanne ..... <b>6</b> Contributor address; City; State; Zip Code  Allen, TX 75002	<b>7</b> Amount of Contribution (\$) \$47.00
<b>8</b> Principal occupation / Job title (See Instructions) CPA		<b>9</b> Employer (See Instructions) GPP
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Barbara ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, Barbara ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wardlaw, Andrea ..... Contributor address; City; State; Zip Code  Cypress, TX 77429	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Shipping Coordinator		Employer (See Instructions) Hh Oil Tools Inc.
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wardlaw, Andrea ..... Contributor address; City; State; Zip Code  Cypress, TX 77429	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Shipping Coordinator		Employer (See Instructions) Hh Oil Tools Inc.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 222/239 Rpt: 225/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warnock, Neva ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75074	<b>7</b> Amount of Contribution (\$) \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Data Analyst		<b>9</b> Employer (See Instructions) Txu Energy
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Penny ..... Contributor address; City; State; Zip Code  Round Rock, TX 78681	Amount of Contribution (\$) \$47.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Ellen ..... Contributor address; City; State; Zip Code  St. Louis, MO 63124	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Ellen Watkins & Assoc.		Employer (See Instructions) Ellen Watkins & Assoc
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Mark ..... Contributor address; City; State; Zip Code  Chicago, IL 60657	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Sabime ..... Contributor address; City; State; Zip Code  Plano, TX 75074	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 223/239 Rpt: 226/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weathers, Hazel ..... <b>6</b> Contributor address; City; State; Zip Code  Bowie, MD 20720	<b>7</b> Amount of Contribution (\$) \$20.25
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Leslie ..... Contributor address; City; State; Zip Code  Ashland, OH 44805	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeks-Ramirez, Jessica ..... Contributor address; City; State; Zip Code  Murphy, TX 75094	Amount of Contribution (\$) \$20.25
Principal occupation / Job title (See Instructions) Medical Biller		Employer (See Instructions) Akumin
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiner, Peter ..... Contributor address; City; State; Zip Code  Berkeley, CA 94708	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Cox Castle
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weisbrod, Carl ..... Contributor address; City; State; Zip Code  Dallas, TX 75230	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 224/239 Rpt: 227/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Juley	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  Fairview, TX 75069	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Juley	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Fairview, TX 75069	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Juley	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Fairview, TX 75069	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werner, MK	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werner, Mk	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

## MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 225/239 Rpt: 228/291
<b>2</b> FILER NAME  Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)  Werstein, Lori	<b>7</b> Amount of Contribution (\$)  \$1.00
	<b>6</b> Contributor address; City; State; Zip Code  Laguna Beach, CA 92651	
<b>8</b> Principal occupation / Job title (See Instructions)  Adjunct Faculty		<b>9</b> Employer (See Instructions)  Lcad
<b>Date</b> 08/10/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)  West, Jay	<b>Amount of Contribution (\$)</b>  \$10.00
	Contributor address; City; State; Zip Code  Dallas, TX 75219	
Principal occupation / Job title (See Instructions)  Comml Real Estate		Employer (See Instructions)  Self
<b>Date</b> 08/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)  Westerlund, Trina	<b>Amount of Contribution (\$)</b>  \$5.00
	Contributor address; City; State; Zip Code  Bellevue, WA 98004	
Principal occupation / Job title (See Instructions)  Retired		Employer (See Instructions)  Retired
<b>Date</b> 08/10/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)  Westerlund, Trina	<b>Amount of Contribution (\$)</b>  \$5.00
	Contributor address; City; State; Zip Code  Bellevue, WA 98004	
Principal occupation / Job title (See Instructions)  Retired		Employer (See Instructions)  Retired
<b>Date</b> 08/09/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)  Westerlund, Trina	<b>Amount of Contribution (\$)</b>  \$10.00
	Contributor address; City; State; Zip Code  Bellevue, WA 98004	
Principal occupation / Job title (See Instructions)  Retired		Employer (See Instructions)  Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 226/239 Rpt: 229/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wharton, Denise	<b>7</b> Amount of Contribution (\$) \$17.00
	<b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75035	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Randy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Randy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Randy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Randy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 227/239 Rpt: 230/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 11/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Randy	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Randy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Thelma	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitescarver, Crystal	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Tampa, FL 33613	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitt, Mary Lou	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code  Dallas, TX 75287	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

## MONETARY POLITICAL CONTRIBUTIONS

## **SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 228/239 Rpt: 231/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 07/29/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wholesale Beer Distributors of Texas ..... <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilensky, Melinda ..... Contributor address; City; State; Zip Code  Dallas, TX 75230	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilensky, Sharon ..... Contributor address; City; State; Zip Code  San Francisco, CA 94122	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Annette ..... Contributor address; City; State; Zip Code  Rowlett, TX 75089	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Patricia ..... Contributor address; City; State; Zip Code  Quitman, TX 75783	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 229/239 Rpt: 232/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/03/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Mindy	<b>7</b> Amount of Contribution (\$) \$47.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075	
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) Lewisville Isd
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Mindy	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Lewisville ISD
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Thomas	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Dallas, TX 75229	
Principal occupation / Job title (See Instructions) Western Frontier		Employer (See Instructions) CEO
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wininger, Lisa	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Technical Writer		Employer (See Instructions) Self
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winters, Kevin	Amount of Contribution (\$) \$47.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>				<b>1</b> Total pages Schedule A1: Sch: 230/239 Rpt: 233/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)				<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/09/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wofford, Rose	<b>7</b> Amount of Contribution (\$) \$25.00		
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075			
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired		
<b>Date</b> 08/08/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolszon, Linda	<b>Amount of Contribution (\$)</b> \$17.00		
	<b>Contributor address; City; State; Zip Code</b>  Fort Worth, TX 76109			
Principal occupation / Job title (See Instructions) Lcsw		Employer (See Instructions) JPS		
<b>Date</b> 08/13/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Wong, Susanne	<b>Amount of Contribution (\$)</b> \$1.64		
	<b>Contributor address; City; State; Zip Code</b>  Lafayette, CA 94549			
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Oil Change International		
<b>Date</b> 08/07/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Charles M	<b>Amount of Contribution (\$)</b> \$100.00		
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75252			
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None		
<b>Date</b> 10/27/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Charles M	<b>Amount of Contribution (\$)</b> \$50.00		
	<b>Contributor address; City; State; Zip Code</b>  DALLAS, TX 75252			
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none		

## MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 231/239 Rpt: 234/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/01/2025	<b>5</b> Full name of contributor Wood-Martin, Donna ..... <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75287	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Faculty Coordinator		<b>9</b> Employer (See Instructions) Ut Southwestern Medical Center
Date 08/01/2025	Full name of contributor Wood-Martin, Donna ..... Contributor address; City; State; Zip Code  Dallas, TX 75287	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Faculty Coordinator		Employer (See Instructions) Ut Southwestern Medical Center
Date 07/01/2025	Full name of contributor Wood-Martin, Donna ..... Contributor address; City; State; Zip Code  Dallas, TX 75287	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Faculty Coordinator		Employer (See Instructions) UT Southwestern Medical Center
Date 10/01/2025	Full name of contributor Wood-Martin, Donna ..... Contributor address; City; State; Zip Code  Dallas, TX 75287	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Faculty Coordinator		Employer (See Instructions) UT Southwestern Medical Center
Date 11/01/2025	Full name of contributor Wood-Martin, Donna ..... Contributor address; City; State; Zip Code  Dallas, TX 75287	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Faculty Coordinator		Employer (See Instructions) UT Southwestern Medical Center

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>			<b>1</b> Total pages Schedule A1: Sch: 232/239 Rpt: 235/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)			<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 12/01/2025	<b>5</b> Full name of contributor Wood-Martin, Donna .....  <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75287	<b>7</b> Amount of Contribution (\$)  \$50.00	
<b>8</b> Principal occupation / Job title (See Instructions) Faculty Coordinator		<b>9</b> Employer (See Instructions) UT Southwestern Medical Center	
Date 08/11/2025	Full name of contributor Wooderson, Meredith .....  Contributor address; City; State; Zip Code  Austin, TX 78759	Amount of Contribution (\$)  \$20.25	
Principal occupation / Job title (See Instructions) Corporate Trainer		Employer (See Instructions) House Of Colour	
Date 12/27/2025	Full name of contributor Wooten, Debi .....  Contributor address; City; State; Zip Code  Plano, TX 75075	Amount of Contribution (\$)  \$25.00	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed	
Date 10/28/2025	Full name of contributor Wu, Eugene .....  Contributor address; City; State; Zip Code  Houston, TX 77081	Amount of Contribution (\$)  \$500.00	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self	
Date 08/04/2025	Full name of contributor Wyll, Sue .....  Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$75.00	
Principal occupation / Job title (See Instructions) Sales Rep		Employer (See Instructions) Doris Sanders Ltd	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 233/239 Rpt: 236/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 11/18/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyll, Sue ..... <b>6</b> Contributor address; City; State; Zip Code  Wylie, TX 75098	<b>7</b> Amount of Contribution (\$) \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Sales rep		<b>9</b> Employer (See Instructions) Doris Sanders Ltd
Date 08/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wynns, Judith ..... Contributor address; City; State; Zip Code  Somersville, MA 02145	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, I ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) HPE
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Katherine ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Laura ..... Contributor address; City; State; Zip Code  Danbury, CT 06810	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ordained Interfaith Minister		Employer (See Instructions) Belovednow

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 234/239 Rpt: 237/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Sharon	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75220	
<b>8</b> Principal occupation / Job title (See Instructions) Investor		<b>9</b> Employer (See Instructions) Quadrant Holdings
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Susan	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Susan	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Susan	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Plano, AZ 75025	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Susan	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 235/239 Rpt: 238/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 10/24/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Susan	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75025	
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Youngblood, Clay	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Youngblood, Clay	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Youngblood, Clay	Amount of Contribution (\$) \$7.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Youngblood, Clay	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 236/239 Rpt: 239/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 08/20/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zajac, Karen	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75024	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zoscak, Emily	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zuffante, Vincent	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Chicago, IL 60611	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Mayer Brown Llp
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) bolner, kathy	Amount of Contribution (\$) \$17.00
	Contributor address; City; State; Zip Code  McKinney, TX 75072	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) bray, elizabeth	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Austin, TX 78746	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 237/239 Rpt: 240/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/30/2025	<b>5</b> Full name of contributor cote, scott	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Allen, TX 75002	
<b>8</b> Principal occupation / Job title (See Instructions) Software Engineer		<b>9</b> Employer (See Instructions) Lucidworks
<b>Date</b> 10/30/2025	<b>Full name of contributor</b> cote, scott	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Contributor address; City; State; Zip Code</b>  Allen, TX 75002	
<b>Principal occupation / Job title (See Instructions)</b> Software Engineer		<b>Employer (See Instructions)</b> Lucidworks
<b>Date</b> 11/30/2025	<b>Full name of contributor</b> cote, scott	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Contributor address; City; State; Zip Code</b>  Allen, TX 75002	
<b>Principal occupation / Job title (See Instructions)</b> Software Engineer		<b>Employer (See Instructions)</b> Lucidworks
<b>Date</b> 12/30/2025	<b>Full name of contributor</b> cote, scott	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Contributor address; City; State; Zip Code</b>  Allen, TX 75002	
<b>Principal occupation / Job title (See Instructions)</b> Software Engineer		<b>Employer (See Instructions)</b> Lucidworks
<b>Date</b> 09/17/2025	<b>Full name of contributor</b> klion, Howard	<b>Amount of Contribution (\$)</b> \$1,000.00
	<b>Contributor address; City; State; Zip Code</b>  Dallas, TX 75225	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 238/239 Rpt: 241/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) laughlin, ginny	<b>7</b> Amount of Contribution (\$) \$24.00
	<b>6</b> Contributor address; City; State; Zip Code  Richardson, TX 75080	
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Broker		<b>9</b> Employer (See Instructions) Self
<b>Date</b> 10/14/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) laughlin, ginny	<b>Amount of Contribution (\$)</b> \$24.00
	<b>Contributor address; City; State; Zip Code</b>  Richardson, TX 75080	
<b>Principal occupation / Job title (See Instructions)</b> Real Estate Broker		<b>Employer (See Instructions)</b> Self
<b>Date</b> 11/14/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) laughlin, ginny	<b>Amount of Contribution (\$)</b> \$24.00
	<b>Contributor address; City; State; Zip Code</b>  Richardson, TX 75080	
<b>Principal occupation / Job title (See Instructions)</b> Real Estate Broker		<b>Employer (See Instructions)</b> Self
<b>Date</b> 12/14/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) laughlin, ginny	<b>Amount of Contribution (\$)</b> \$24.00
	<b>Contributor address; City; State; Zip Code</b>  Richardson, TX 75080	
<b>Principal occupation / Job title (See Instructions)</b> Real Estate Broker		<b>Employer (See Instructions)</b> Self
<b>Date</b> 12/24/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) minuete, joanne	<b>Amount of Contribution (\$)</b> \$47.00
	<b>Contributor address; City; State; Zip Code</b>  Plano, TX 75075	
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 239/239 Rpt: 242/291
<b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00086010
<b>4</b> Date 09/25/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) philips, laura ..... <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75093	<b>7</b> Amount of Contribution (\$) \$17.00
<b>8</b> Principal occupation / Job title (See Instructions) Prop mgt		<b>9</b> Employer (See Instructions) VMS
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) sanders, nancy ..... Contributor address; City; State; Zip Code  Dallas, TX 75229	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) vanGoethem, Eric ..... Contributor address; City; State; Zip Code  Dallas, TX 75252	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Home Care Agency Owner		Employer (See Instructions) Amada Senior Care
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) vanVoorhis, Jill ..... Contributor address; City; State; Zip Code  Austin, TX 78746	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Stratecom Advisors LLC

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

<p><b>The Instruction Guide explains how to complete this form.</b></p>				<p><b>1</b> Total pages Schedule A2: Sch: 1/2 Rpt: 243/291</p>
<p><b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)</p>				<p><b>3</b> Filer ID (Ethics Commission Filers) 00086010</p>
<p><b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p><b>5</b> Date 09/30/2025</p>	<p><b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plesa, Mihaela (Rep.)  <b>7</b> Contributor address; City; State; Zip Code  Dallas, TX 75248</p>			<p><b>8</b> Amount of contribution (\$) \$361.90</p> <p><b>9</b> In-kind contribution description Office supplies</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p><b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) State Representative</p>		<p><b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) Texas House of Representatives</p>		
<p><b>12</b> Contributor's principal occupation (FOR JUDICIAL)</p>		<p><b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p><b>14</b> Contributor's employer/law firm (FOR JUDICIAL)</p>		<p><b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p><b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 10/31/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plesa, Mihaela (Rep.)  Contributor address; City; State; Zip Code  Dallas, TX 75248</p>			<p>Amount of contribution (\$) \$406.58</p> <p>In-kind contribution description Supplies for campaign kickoff</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) State Representative</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions) Texas House of Representatives</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 11/30/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plesa, Mihaela (Rep.)  Contributor address; City; State; Zip Code  Dallas, TX 75248</p>			<p>Amount of contribution (\$) \$137.82</p> <p>In-kind contribution description Office supplies</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) State Representative</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions) Texas House of Representatives</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

<p><b>The Instruction Guide explains how to complete this form.</b></p>				<p><b>1</b> Total pages Schedule A2: Sch: 2/2 Rpt: 244/291</p>
<p><b>2</b> FILER NAME Plesa, Mihaela E. (The Honorable)</p>				<p><b>3</b> Filer ID (Ethics Commission Filers) 00086010</p>
<p><b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p><b>5</b> Date 07/31/2025</p>	<p><b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plesa, Mihaela (Rep.)  <b>7</b> Contributor address; City; State; Zip Code  Dallas, TX 75248</p>			<p><b>8</b> Amount of contribution (\$) \$244.33</p> <p><b>9</b> In-kind contribution description Office supplies</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p><b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) State Representative</p>		<p><b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) Texas House of Representatives</p>		
<p><b>12</b> Contributor's principal occupation (FOR JUDICIAL)</p>		<p><b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p><b>14</b> Contributor's employer/law firm (FOR JUDICIAL)</p>		<p><b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p><b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 07/29/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREPAC Texas Association of Realtors PAC  Contributor address; City; State; Zip Code  Austin, TX 78768</p>			<p>Amount of contribution (\$) \$525.00</p> <p>In-kind contribution description Advertising</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 08/22/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas HDCC  Contributor address; City; State; Zip Code  Austin, TX 78752</p>			<p>Amount of contribution (\$) \$1,923.08</p> <p>In-kind contribution description Legal</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

# 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: 1/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 11/07/2025	5 Payee name AT&T	
6 Amount (\$) \$158.34	7 Payee address; City; State; Zip Code 1900 University Ave  AUSTIN, TX 78705	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Session apartment wifi
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/08/2025	Payee name AT&T	
Amount (\$) \$60.61	Payee address; City; State; Zip Code 1900 University Ave  AUSTIN, TX 78705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Session apartment wifi
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/05/2025	Payee name AT&T	
Amount (\$) \$60.61	Payee address; City; State; Zip Code 1900 University Ave  AUSTIN, TX 78705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Session apartment wifi
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: 2/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 07/07/2025	5 Payee name AT&T	
6 Amount (\$) \$60.61	7 Payee address; City; State; Zip Code 1900 University Ave  AUSTIN, TX 78705	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Session apartment wifi
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/07/2025	Payee name ActBlue	
Amount (\$) \$22.56	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/14/2025	Payee name ActBlue	
Amount (\$) \$8.07	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card 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: 3/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 07/21/2025	5 Payee name ActBlue	
6 Amount (\$) \$32.44	7 Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 07/28/2025	Payee name ActBlue	
Amount (\$) \$252.37	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 08/03/2025	Payee name ActBlue	
Amount (\$) \$358.15	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	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: 4/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 08/07/2025	5 Payee name ActBlue	
6 Amount (\$) \$229.66	7 Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 08/10/2025	Payee name ActBlue	
Amount (\$) \$268.22	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 08/13/2025	Payee name ActBlue	
Amount (\$) \$234.58	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	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: 5/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 08/19/2025	5 Payee name ActBlue	
6 Amount (\$) \$240.09	7 Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 08/26/2025	Payee name ActBlue	
Amount (\$) \$78.24	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 09/02/2025	Payee name ActBlue	
Amount (\$) \$92.71	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	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: 6/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 09/07/2025	5 Payee name ActBlue	
6 Amount (\$) \$48.74	7 Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 09/14/2025	Payee name ActBlue	
Amount (\$) \$74.94	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 09/18/2025	Payee name ActBlue	
Amount (\$) \$207.21	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	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: 7/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 09/25/2025	5 Payee name ActBlue	
6 Amount (\$) \$40.61	7 Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 09/30/2025	Payee name ActBlue	
Amount (\$) \$40.87	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 10/07/2025	Payee name ActBlue	
Amount (\$) \$16.08	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	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: 8/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 10/14/2025	5 Payee name ActBlue	
6 Amount (\$) \$109.11	7 Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 10/21/2025	Payee name ActBlue	
Amount (\$) \$87.35	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 10/27/2025	Payee name ActBlue	
Amount (\$) \$287.16	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	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: 9/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 11/02/2025	5 Payee name ActBlue	
6 Amount (\$) \$231.02	7 Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 11/09/2025	Payee name ActBlue	
Amount (\$) \$2.64	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 11/16/2025	Payee name ActBlue	
Amount (\$) \$243.59	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	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: 10/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 11/23/2025	5 Payee name ActBlue	
6 Amount (\$) \$34.93	7 Payee address; City; PO Box 441146  Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 11/30/2025	Payee name ActBlue	
Amount (\$) \$14.79	Payee address; City; PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 12/07/2025	Payee name ActBlue	
Amount (\$) \$30.29	Payee address; City; PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	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: 11/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 12/14/2025	5 Payee name ActBlue	
6 Amount (\$) \$36.81	7 Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 12/21/2025	Payee name ActBlue	
Amount (\$) \$16.15	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	Office sought Office held
Date 12/28/2025	Payee name ActBlue	
Amount (\$) \$64.11	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ActBlue	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: 12/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 12/31/2025	5 Payee name ActBlue	
6 Amount (\$) \$155.07	7 Payee address; City; PO Box 441146  Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name Alden Self Storage	
Amount (\$) \$30.00	Payee address; City; 1710 14TH STREET  PLANO, TX 75074	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign storage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name Alden Self Storage	
Amount (\$) \$30.00	Payee address; City; 1710 14TH STREET  PLANO, TX 75074	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign 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: 13/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 10/02/2025	5 Payee name Alden Self Storage	
6 Amount (\$) \$30.00	7 Payee address; City; 1710 14TH STREET  PLANO, TX 75074	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign storage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/02/2025	Payee name Alden Self Storage	
Amount (\$) \$30.00	Payee address; City; 1710 14TH STREET  PLANO, TX 75074	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign storage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/04/2025	Payee name Alden Self Storage	
Amount (\$) \$30.00	Payee address; City; 1710 14TH STREET  PLANO, TX 75074	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign 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: 14/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 07/02/2025	5 Payee name Alden Self Storage	
6 Amount (\$) \$30.00	7 Payee address; City; 1710 14TH STREET  PLANO, TX 75074	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign storage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/28/2025	Payee name American Airlines	
Amount (\$) \$115.90	Payee address; City; 3200 E Airfield Dr  Dallas, TX 75261	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel to Austin
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name ArtCentre of Plano, Inc.	
Amount (\$) \$300.00	Payee address; City; P.O. Box 860353  Plano, TX 75086	
PURPOSE OF EXPENDITURE	(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 Campaign Kickoff venue rental
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: 15/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 08/29/2025	5 Payee name ArtCentre of Plano, Inc.	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code P.O. Box 860353  Plano, TX 75086	
8 PURPOSE OF EXPENDITURE	(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 Campaign Kickoff venue rental
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/02/2025	Payee name Avenir Apartments	
Amount (\$) \$32.57	Payee address; City; State; Zip Code 1109 N Interstate 35  Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Session apartment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/04/2025	Payee name Avenir Apartments	
Amount (\$) \$2,920.53	Payee address; City; State; Zip Code 1109 N Interstate 35  Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Session apartment
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: 16/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 07/02/2025	5 Payee name Avenir Apartments	
6 Amount (\$) \$2,933.09	7 Payee address; City; State; Zip Code 1109 N Interstate 35  Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Session apartment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/20/2025	Payee name Blue Nation Strategies	
Amount (\$) \$4,500.00	Payee address; City; State; Zip Code 5900 Harwick Road  Bethesda, MD 20816	
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 Mail/Digital consultant
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/13/2025	Payee name Blue Nation Strategies	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 5900 Harwick Road  Bethesda, MD 20816	
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 Mail/Digital consultant
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: 17/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 09/22/2025	5 Payee name Bluebird Strategy Group	
6 Amount (\$) \$4,000.00	7 Payee address; City; State; Zip Code 4849 Greenville Ave., Ste 1370  Dallas, TX 75206	
8 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 Fundraising Consultant
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/02/2025	Payee name Bluebird Strategy Group	
Amount (\$) \$8,000.00	Payee address; City; State; Zip Code 4849 Greenville Ave., Ste 1370  Dallas, TX 75206	
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 Fundraising Consultant
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/29/2025	Payee name Buffer	
Amount (\$) \$44.69	Payee address; City; State; Zip Code 2443 Fillmore St #380-7163  San Francisco, CA 94115	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Social media
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: 18/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 11/28/2025	5 Payee name Buffer	
6 Amount (\$) \$44.69	7 Payee address; City; State; Zip Code 2443 Fillmore St #380-7163  San Francisco, CA 94115	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Social media
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Buffer	Office sought Office held
Date 10/27/2025	Payee name Buffer	
Amount (\$) \$44.69	Payee address; City; State; Zip Code 2443 Fillmore St #380-7163  San Francisco, CA 94115	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Buffer	Office sought Office held
Date 09/29/2025	Payee name Buffer	
Amount (\$) \$44.69	Payee address; City; State; Zip Code 2443 Fillmore St #380-7163  San Francisco, CA 94115	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Buffer	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: 19/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 08/27/2025	5 Payee name Buffer	
6 Amount (\$) \$44.69	7 Payee address; City; State; Zip Code 2443 Fillmore St #380-7163  San Francisco, CA 94115	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Social media
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Buffer	Office sought Office held
Date 07/28/2025	Payee name Buffer	
Amount (\$) \$44.69	Payee address; City; State; Zip Code 2443 Fillmore St #380-7163  San Francisco, CA 94115	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Central Market	Office sought Office held
Date 11/03/2025	Payee name Central Market	
Amount (\$) \$367.04	Payee address; City; State; Zip Code 320 Coit Rd  Plano, TX 75075	
PURPOSE OF EXPENDITURE	(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 Kickoff catering
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Central Market	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: 20/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 08/19/2025	5 Payee name Clay Pit Contemporary Indian Cuisine	
6 Amount (\$) \$148.97	7 Payee address; City; State; Zip Code 1601 Guadalupe St.  Austin, TX 78701	
8 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 Staff lunch
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/09/2025	Payee name Collin County Democratic Party	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 6829 K Ave Ste 111  Plano, TX 75074	
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
Date 10/03/2025	Payee name Collin County Democratic Party	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 6829 K Ave Ste 111  Plano, TX 75074	
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 Event sponsorship
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: 21/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 12/15/2025	5 Payee name Constant Contact	
6 Amount (\$) \$335.79	7 Payee address; City; State; Zip Code 1601 Trapelo Road Suite 329  Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Emails
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/10/2025	Payee name Constant Contact	
Amount (\$) \$335.79	Payee address; City; State; Zip Code 1601 Trapelo Road Suite 329  Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Emails
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/10/2025	Payee name Constant Contact	
Amount (\$) \$335.79	Payee address; City; State; Zip Code 1601 Trapelo Road Suite 329  Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Emails
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: 22/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 09/10/2025	5 Payee name Constant Contact	
6 Amount (\$) \$335.79	7 Payee address; City; State; Zip Code 1601 Trapelo Road Suite 329  Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Emails
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/11/2025	Payee name Constant Contact	
Amount (\$) \$335.79	Payee address; City; State; Zip Code 1601 Trapelo Road Suite 329  Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Emails
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/10/2025	Payee name Constant Contact	
Amount (\$) \$335.79	Payee address; City; State; Zip Code 1601 Trapelo Road Suite 329  Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Emails
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: 23/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 07/18/2025	5 Payee name Cook Political Report	
6 Amount (\$) \$10.00	7 Payee address; City; State; Zip Code 1655 Fort Myer Dr  Arlington, VA 22209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name Crossroads Consultative, LLC	
Amount (\$) \$2,813.42	Payee address; City; State; Zip Code 1616 West 6th Street, #207  Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Website
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name Crossroads Consultative, LLC	
Amount (\$) \$2,488.67	Payee address; City; State; Zip Code 1616 West 6th Street, #207  Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Website
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: 24/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 10/06/2025	5 Payee name Crossroads Consultative, LLC	
6 Amount (\$) \$350.00	7 Payee address; City; State; Zip Code 1616 West 6th Street, #207  Austin, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Website
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/20/2025	Payee name Dem Signs	
Amount (\$) \$3,200.00	Payee address; City; State; Zip Code 1401 Harvest Glen Drive  PLANO, TX 75074	
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 Consultant
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/20/2025	Payee name Dem Signs	
Amount (\$) \$3,200.00	Payee address; City; State; Zip Code 1401 Harvest Glen Drive  PLANO, TX 75074	
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 Consultant
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: 25/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 09/02/2025	5 Payee name Dem Signs	
6 Amount (\$) \$3,200.00	7 Payee address; City; State; Zip Code 1401 Harvest Glen Drive  PLANO, TX 75074	
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 Consultant
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/14/2025	Payee name Dem Signs	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1401 Harvest Glen Drive  PLANO, TX 75074	
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 Consultant
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/30/2025	Payee name Designer Graphics	
Amount (\$) \$449.17	Payee address; City; State; Zip Code 12404 State Hwy 155  Tyler, TX 75703	
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 Literature and sign printing
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: 26/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 10/17/2025	5 Payee name Designer Graphics	
6 Amount (\$) \$1,109.95	7 Payee address; City; 12404 State Hwy 155  Tyler, TX 75703	
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 T-shirt printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/14/2025	Payee name Doubletree Suites	
Amount (\$) \$285.23	Payee address; City; 303 W. 15TH ST  AUSTIN, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lodging in Austin
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/03/2025	Payee name Dropbox, Inc	
Amount (\$) \$21.31	Payee address; City; PO Box 77767  San Francisco, CA 94107	
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 Image hosting
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: 27/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 11/03/2025	5 Payee name Dropbox, Inc	
6 Amount (\$) \$21.31	7 Payee address; City; State; Zip Code PO Box 77767  San Francisco, CA 94107	
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 Image hosting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Dropbox, Inc	Office sought Office held
Date 10/03/2025	Payee name Dropbox, Inc	
Amount (\$) \$21.30	Payee address; City; State; Zip Code PO Box 77767  San Francisco, CA 94107	
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 Image hosting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Dropbox, Inc	Office sought Office held
Date 09/03/2025	Payee name Dropbox, Inc	
Amount (\$) \$21.31	Payee address; City; State; Zip Code PO Box 77767  San Francisco, CA 94107	
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 Image hosting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Dropbox, Inc	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: 28/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 08/04/2025	5 Payee name Dropbox, Inc	
6 Amount (\$) \$21.31	7 Payee address; City; State; Zip Code PO Box 77767  San Francisco, CA 94107	
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 Image hosting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Dropbox, Inc	Office sought Office held
Date 07/07/2025	Payee name Dropbox, Inc	
Amount (\$) \$21.31	Payee address; City; State; Zip Code PO Box 77767  San Francisco, CA 94107	
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 Image hosting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Executive Press, Inc.	Office sought Office held
Date 12/18/2025	Payee name Executive Press, Inc.	
Amount (\$) \$20.00	Payee address; City; State; Zip Code 1400 Presidential Dr  Richardson, TX 75081	
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 Campaign literature
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Executive Press, Inc.	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: 29/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 12/03/2025	5 Payee name Extra Space Storage	
6 Amount (\$) \$54.00	7 Payee address; City; 5656 N Interstate 35  Austin, TX 78751	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Storage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name Extra Space Storage	
Amount (\$) \$54.00	Payee address; City; 5656 N Interstate 35  Austin, TX 78751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Storage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/03/2025	Payee name Extra Space Storage	
Amount (\$) \$54.00	Payee address; City; 5656 N Interstate 35  Austin, TX 78751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense 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: 30/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 08/28/2025	5 Payee name Extra Space Storage	
6 Amount (\$) \$83.00	7 Payee address; City; 5656 N Interstate 35  Austin, TX 78751	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Storage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 09/03/2025	Payee name Firefighting's Finest Movers	Office held
Amount (\$) \$295.61	Payee address; City; 2306 Sherwin St.  Garland, TX 75401	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Move out of session apartment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 08/29/2025	Payee name Firefighting's Finest Movers	Office held
Amount (\$) \$125.00	Payee address; City; 2306 Sherwin St.  Garland, TX 75401	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Move out of session apartment
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: 31/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 09/18/2025	5 Payee name Goodman Campaigns	
6 Amount (\$) \$1,319.27	7 Payee address; City; State; Zip Code 211 E 7th Street, Suite 20  Austin, TX 78791	
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 Digital fundraising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/14/2025	Payee name Goodman Campaigns	
Amount (\$) \$1,013.30	Payee address; City; State; Zip Code 211 E 7th Street, Suite 20  Austin, TX 78791	
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 Digital fundraising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/14/2025	Payee name Goodman Campaigns	
Amount (\$) \$880.70	Payee address; City; State; Zip Code 211 E 7th Street, Suite 20  Austin, TX 78791	
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 Digital fundraising
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: 32/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 07/07/2025	5 Payee name Goodman Campaigns	
6 Amount (\$) \$941.93	7 Payee address; City; State; Zip Code 211 E 7th Street, Suite 20  Austin, TX 78791	
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 Digital fundraising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/13/2025	Payee name Guestbooker.com, LLC	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code P.O. Box 1685  Brentwood, TN 37024	
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 Communications consultant
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name Gusto	
Amount (\$) \$37.31	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
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: 33/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 11/04/2025	5 Payee name Gusto	
6 Amount (\$) \$37.31	7 Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/02/2025	Payee name Gusto	
Amount (\$) \$43.71	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/22/2025	Payee name Gusto	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
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: 34/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 09/03/2025	5 Payee name Gusto	
6 Amount (\$) \$37.31	7 Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/05/2025	Payee name Gusto	
Amount (\$) \$56.49	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/09/2025	Payee name Gusto	
Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
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: 35/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 07/09/2025	5 Payee name Gusto	
6 Amount (\$) \$399.00	7 Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/03/2025	Payee name Gusto	
Amount (\$) \$50.11	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/03/2025	Payee name Leach, Jeff (Rep.)	
Amount (\$) \$706.30	Payee address; City; State; Zip Code 300 E. Davis St., #170  McKinney, TX 75069	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 High school graduation certificates
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: 36/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 07/25/2025	5 Payee name Legislative Solutions	
6 Amount (\$) \$380.00	7 Payee address; City; P.O. Box 5643  Austin, TX 78763	State; Zip Code
8 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 Email distribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name  Candidate/Officeholder name	Office sought  Office held
Date 12/26/2025	Payee name Olive Garden	
Amount (\$) \$257.08	Payee address; City; 700 N Central Expressway  Plano, TX 75074	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 Meal for Plano Firefighters
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name  Candidate/Officeholder name	Office sought  Office held
Date 11/25/2025	Payee name Ringness, Jesse	
Amount (\$) \$250.00	Payee address; City; 11201 Alexandria Dr  Frisco, TX 75035	State; Zip Code
PURPOSE OF EXPENDITURE	(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 Photo backdrop
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name  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: 37/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 11/24/2025	5 Payee name Rodman, Megan	
6 Amount (\$) \$4,000.00	7 Payee address; City; 5503 Mercedes Avenue  Dallas, TX 75206	
8 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 Fundraising Consultant
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rodman, Megan	Office sought Office held
Date 10/16/2025	Payee name Rodman, Megan	
Amount (\$) \$4,000.00	Payee address; City; 5503 Mercedes Avenue  Dallas, TX 75206	
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 Fundraising Consultant
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rodman, Megan	Office sought Office held
Date 12/02/2025	Payee name Scale to Win	
Amount (\$) \$231.82	Payee address; City; 13742 Harper Street  Santa Ana, CA 92703	
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 Text Campaign
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rodman, Megan	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: 38/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 11/06/2025	5 Payee name Scale to Win	
6 Amount (\$) \$25.88	7 Payee address; City; State; Zip Code 13742 Harper Street  Santa Ana, CA 92703	
8 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 Text Campaign
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/03/2025	Payee name Scale to Win	
Amount (\$) \$138.89	Payee address; City; State; Zip Code 13742 Harper Street  Santa Ana, CA 92703	
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 Text Campaign
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/04/2025	Payee name Scale to Win	
Amount (\$) \$2,074.97	Payee address; City; State; Zip Code 13742 Harper Street  Santa Ana, CA 92703	
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 Text Campaign
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: 39/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 07/03/2025	5 Payee name Scale to Win	
6 Amount (\$) \$1,574.34	7 Payee address; City; State; Zip Code 13742 Harper Street  Santa Ana, CA 92703	
8 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 Text Campaign
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/08/2025	Payee name Simply to Impress	
Amount (\$) \$648.00	Payee address; City; State; Zip Code 23801 Calabasas Road  Calabasas, CA 91302	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Christmas Cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/08/2025	Payee name Southwest Airlines	
Amount (\$) \$592.95	Payee address; City; State; Zip Code 2702 Love Field Drive  Dallas, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel to Austin
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: 40/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 08/25/2025	5 Payee name Southwest Airlines	
6 Amount (\$) \$32.00	7 Payee address; City; 2702 Love Field Drive  Dallas, TX 75235	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Baggage fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/25/2025	Payee name Southwest Airlines	
Amount (\$) \$286.48	Payee address; City; 2702 Love Field Drive  Dallas, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel to District
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/05/2025	Payee name Southwest Airlines	
Amount (\$) \$35.00	Payee address; City; 2702 Love Field Drive  Dallas, TX 75235	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight change 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: 41/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 09/08/2025	5 Payee name Sushi Junai	
6 Amount (\$) \$108.10	7 Payee address; City; State; Zip Code 1612 Lavaca St  Austin, TX 78701	
8 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 Staff lunch
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/09/2025	Payee name Switchboard Public Benefit Corp	
Amount (\$) \$718.50	Payee address; City; State; Zip Code PO Box 33485  Washington, DC 20033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Texts
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/07/2025	Payee name Switchboard Public Benefit Corp	
Amount (\$) \$542.33	Payee address; City; State; Zip Code PO Box 33485  Washington, DC 20033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Texts
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: 42/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 07/10/2025	5 Payee name Switchboard Public Benefit Corp	
6 Amount (\$) \$433.85	7 Payee address; City; State; Zip Code PO Box 33485  Washington, DC 20033	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Texts
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/03/2025	Payee name Target	
Amount (\$) \$116.98	Payee address; City; State; Zip Code 901 E 5th St. Ste 140  Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Gifts for Speaker's Angel Tree
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/11/2025	Payee name USPS	
Amount (\$) \$392.75	Payee address; City; State; Zip Code 5995 Summerside Dr  Dallas, TX 75248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Postage for Christmas Cards
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: 43/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 10/27/2025	5 Payee name Union Coffee	
6 Amount (\$) \$136.94	7 Payee address; City; State; Zip Code 3705 Cedar Springs Rd.  Dallas, TX 75219	
8 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 Catering for Texas/OU event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/29/2025	Payee name Union Coffee	
Amount (\$) \$119.08	Payee address; City; State; Zip Code 3705 Cedar Springs Rd.  Dallas, TX 75219	
PURPOSE OF EXPENDITURE	(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 Venue rental for Texas/OU event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/14/2025	Payee name Veliz-Magana, Abigail	
Amount (\$) \$111.57	Payee address; City; State; Zip Code 900 E. Park Blvd., Suite 140-C  Plano, TX 75074	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Office supplies reimbursement
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: 44/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 07/02/2025	5 Payee name Veliz-Magana, Abigail	
6 Amount (\$) \$50.38	7 Payee address; City; State; Zip Code 900 E. Park Blvd., Suite 140-C  Plano, TX 75074	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Office supplies reimbursement
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/21/2025	Payee name Villarreal, Jordan	
Amount (\$) \$1,100.00	Payee address; City; State; Zip Code 5201 Par Dr Apt 315  Denton, TX 76208	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Staff housing supplement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/20/2025	Payee name WSDisplay	
Amount (\$) \$68.04	Payee address; City; State; Zip Code 5960 Pascal Ct.  Carlsbad, CA 92008	
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 Banner
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: 45/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 12/19/2025	5 Payee name Wix	
6 Amount (\$) \$3.23	7 Payee address; City; State; Zip Code 500 Tery A Francois Blvd / Fl 6  San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Website
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wix	Office sought Office held
Date 11/12/2025	Payee name Wix	
Amount (\$) \$3.23	Payee address; City; State; Zip Code 500 Tery A Francois Blvd / Fl 6  San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Website
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wix	Office sought Office held
Date 10/14/2025	Payee name Wix	
Amount (\$) \$3.23	Payee address; City; State; Zip Code 500 Tery A Francois Blvd / Fl 6  San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Website
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wix	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: 46/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010
4 Date 09/15/2025	5 Payee name Wix	
6 Amount (\$) \$454.65	7 Payee address; City; State; Zip Code 500 Tery A Francois Blvd / Fl 6  San Francisco, CA 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Website
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wix	Office sought Office held
Date 09/12/2025	Payee name Wix	
Amount (\$) \$3.23	Payee address; City; State; Zip Code 500 Tery A Francois Blvd / Fl 6  San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Website
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wix	Office sought Office held
Date 08/12/2025	Payee name Wix	
Amount (\$) \$3.23	Payee address; City; State; Zip Code 500 Tery A Francois Blvd / Fl 6  San Francisco, CA 94158	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Website
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wix	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: 47/47 Rpt:	2 FILER NAME Plesa, Mihaela E. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086010	
4 Date 07/14/2025	5 Payee name Wix		
6 Amount (\$) \$3.23	7 Payee address; City; State; Zip Code 500 Tery A Francois Blvd / Fl 6  San Francisco, CA 94158		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Website	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held