

**GENERAL-PURPOSE COMMITTEE  
CAMPAIGN FINANCE REPORT**

**FORM GPAC  
COVER SHEET PG 1**

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00064041	2 Total pages filed: 249				
3 COMMITTEE NAME NCHA's Texas Events PAC		<b>OFFICE USE ONLY</b> Date Received <b>ELECTRONICALLY FILED</b> 01/15/2026  Date Hand-delivered or Date Postmarked  Receipt # <input type="text"/> Amount <input type="text"/>  Date Processed  Date Imaged					
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address 260 Bailey Ave.  Fort Worth, TX 76107							
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.			FIRST Deanna M.	MI		
	NICKNAME	LAST Hayes	SUFFIX				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 1841 S Lakeline Blvd Ste 101 No 110 CEDAR PARK, TX 78613		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
7 CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; 1841 S Lakeline Blvd Ste 101 No 110 Cedar Park, TX 78613						
8 CAMPAIGN TREASURER PHONE	AREA CODE (512) 217-5814	PHONE NUMBER	EXTENSION				
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15		<input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff	<input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination			
10 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year	
11 ELECTION	ELECTION DATE Month Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> General		ELECTION TYPE <input type="checkbox"/> Runoff <input type="checkbox"/> Special	<input type="checkbox"/> Other		

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

**FORM GPAC  
COVER SHEET PG 2**

<b>12 COMMITTEE NAME</b> NCHA's Texas Events PAC		<b>13 FILER ID</b> (Ethics Commission Filers) 00064041
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported See Schedule F  B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
<b>15 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 152,012.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 135,127.71
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 30,637.35
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**16 AFFIDAVIT**

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

Ms. Deanna M. Hayes

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**GENERAL-PURPOSE COMMITTEE REPORT:  
PURPOSE****FORM GPAC  
ADDENDUM**

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<b>12 COMMITTEE NAME</b> NCHA's Texas Events PAC		<b>13 FILER ID</b> (Ethics Commission Filers) 00064041
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported  B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	See Schedule F

**SUBTOTALS - GPAC****FORM GPAC**  
**COVER SHEET PG 3**  
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<b>17</b> COMMITTEE NAME NCHA's Texas Events PAC	<b>18</b> FILER ID (Ethics Commission Filers) 00064041
<b>19</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 152,012.00	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS \$	
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
6. <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
7. <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
8. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
9. <input type="checkbox"/> SCHEDULE E: LOANS \$	
10. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 135,127.71	
11. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$	
12. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
13. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$	
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
15. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$ 102.71	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/231 Rpt: 5/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 00 RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  ALVARDO, TX 76009	<b>7</b> Amount of Contribution (\$) \$175.00
	<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 333 SILVER SPUR RANCH ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$180.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 333 SILVER SPUR RANCH ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$300.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 3G'S PARTNERSHIP ..... Contributor address; City; State; Zip Code  CLAREMORE, OK 74017	Amount of Contribution (\$) \$175.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 3R PERFORMANCE HORSES ..... Contributor address; City; State; Zip Code  ABILENE, TX 79605	Amount of Contribution (\$) \$100.00
	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: 2/231 Rpt: 6/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 4 DIAMOND LIVESTOCK .....  <b>6</b> Contributor address; City; State; Zip Code  FOOTHILLS AB T1S6C8 Canada	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 4R CATTLE COMPANY .....  Contributor address; City; State; Zip Code  WILLIAMSON, GA 30292	Amount of Contribution (\$) \$80.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 4Y RANCH .....  Contributor address; City; State; Zip Code  TEMECULA, CA 92592	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 4Y RANCH INC .....  Contributor address; City; State; Zip Code  TEMECULA, CA 92592	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A1 QUARTER HORSES .....  Contributor address; City; State; Zip Code  EDWARDSBURG, MI 49112	Amount of Contribution (\$) \$100.00
	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: 3/231 Rpt: 7/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ABSHIRE, GREG	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  BANDERA, TX 78003	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, CASEY	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  HEMPSTEAD, TX 77445	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, MIKE	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  CLEBURNE, TX 76031	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ADAMS, MIKE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  CLEBURNE, TX 76031	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AGNEW, DANIEL	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  LAPEER, MI 48446	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/231 Rpt: 8/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHLIN, NATE ..... <b>6</b> Contributor address; City; State; Zip Code  PAYSON, UT 84651	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AHLIN, NATE ..... Contributor address; City; State; Zip Code  PAYSON, UT 84651	Amount of Contribution (\$) \$380.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AJ LEGACY RANCH ..... Contributor address; City; State; Zip Code  PAULS VALLEY, OK 73075	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AKIN, MARK ..... Contributor address; City; State; Zip Code  PURCELL, OK 73080	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AKIN, MARK ..... Contributor address; City; State; Zip Code  PURCELL, OK 73080	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/231 Rpt: 9/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AKIN, RUSSELL	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  MIDLAND, TX 79707	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALCORN, MELISSA	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76086-2734	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALDRICH, JUDITH	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  KILLEEN, TX 76542-4253	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALDRICH, WINTHROP	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  KILLEEN, TX 76542-4253	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALEXANDER, PAUL	Amount of Contribution (\$) \$115.00
	Contributor address; City; State; Zip Code  NEW PLYMOUTH, ID 83655	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/231 Rpt: 10/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALGUIRE, WILLIAM ..... <b>6</b> Contributor address; City; State; Zip Code  SHERMAN, TX 75092	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, BRENDA ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087-8571	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, CLINT ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76086	Amount of Contribution (\$) \$215.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, RUSSELL ..... Contributor address; City; State; Zip Code  HOUSTON, TX 77024	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, TANJA ..... Contributor address; City; State; Zip Code  KILLEEN, TX 76549	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/231 Rpt: 11/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLEN, TAYLOR	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  PHILADELPHIA, MS 39350	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALLSTADT, SARA	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  BEDFORD, TX 76021	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMANN, LEXI	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON CATTLE CO	Amount of Contribution (\$) \$160.00
	Contributor address; City; State; Zip Code  VICTORIA, TX 77902	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON CATTLE CO	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  VICTORIA, TX 77902	
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: 8/231 Rpt: 12/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, NATHEN ..... <b>6</b> Contributor address; City; State; Zip Code  ELMORE CITY, OK 73433	<b>7</b> Amount of Contribution (\$) \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANIMUS CONSULTING ..... Contributor address; City; State; Zip Code  DALLAS, TX 75206	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) APPLEGATE, TROY ..... Contributor address; City; State; Zip Code  CELINA, TX 75009	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, BRENDA ..... Contributor address; City; State; Zip Code  MARIETTA, OK 73448-9761	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, BRENDA ..... Contributor address; City; State; Zip Code  MARIETTA, OK 73448-9761	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/231 Rpt: 13/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, HENRIETTA	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, SCOTT	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  WILLISTON, FL 32696	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARMSTRONG, SCOTT	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  WILLISTON, FL 32696	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHLOCK, LINDY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  ABILENE, TX 79602	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHLOCK, LINDY	Amount of Contribution (\$) \$175.00
	Contributor address; City; State; Zip Code  ABILENE, TX 79602	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/231 Rpt: 14/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHLOCK, LINDY	<b>7</b> Amount of Contribution (\$) \$75.00
	<b>6</b> Contributor address; City; State; Zip Code  ABILENE, TX 79602	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ASHLOCK, LINDY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  ABILENE, TX 79602	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AVILES, DANIKA	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACA, TYE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  VEGA, TX 79092	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACA, TYE	Amount of Contribution (\$) \$115.00
	Contributor address; City; State; Zip Code  VEGA, TX 79092	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/231 Rpt: 15/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACKHEUSER, RICARDO	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  SAO PAULO SP 4559010 Brazil	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BACKUS, MIKE	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  DOWAGIAC, MI 49047	\$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, GREG	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  HOUSTON, TX 77029	\$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, GREG	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  HOUSTON, TX 77029	\$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAKER, MICHAEL	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	\$380.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/231 Rpt: 16/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALDWIN, JOHN	<b>7</b> Amount of Contribution (\$) \$200.00
	<b>6</b> Contributor address; City; State; Zip Code  HEMPSTEAD, TX 77445	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANNER, MACALL	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  MILLSAP, TX 76066	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANUELOS, ADAN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  GRANBURY, TX 76049	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANUELOS, ADAN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  GRANBURY, TX 76049	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BANUELOS, ADAN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  GRANBURY, TX 76049	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/231 Rpt: 17/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAR C LAND & CATTLE .....  <b>6</b> Contributor address; City; State; Zip Code  MCCONNELLS, SC 29726	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAR D RANCH .....  Contributor address; City; State; Zip Code  BENJAMIN, UT 84651	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAR D RANCH .....  Contributor address; City; State; Zip Code  BENJAMIN, UT 84651	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAR RR RANCHES .....  Contributor address; City; State; Zip Code  WESTLAKE, TX 76262	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAR RR RANCHES .....  Contributor address; City; State; Zip Code  WESTLAKE, TX 76262	Amount of Contribution (\$) \$100.00
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: 14/231 Rpt: 18/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER RANCH CH ..... <b>6</b> Contributor address; City; State; Zip Code  MADILL, OK 73446	<b>7</b> Amount of Contribution (\$) \$330.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARKER, GARY ..... Contributor address; City; State; Zip Code  MADILL, OK 73446	Amount of Contribution (\$) \$470.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARLOW LIVESTOCK ..... Contributor address; City; State; Zip Code  GILLETTE, WY 82718	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARLOW LIVESTOCK ..... Contributor address; City; State; Zip Code  GILLETTE, WY 82718	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, JEFF ..... Contributor address; City; State; Zip Code  WILTON, CA 95693	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/231 Rpt: 19/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNES, JEFF	<b>7</b> Amount of Contribution (\$) \$355.00
	<b>6</b> Contributor address; City; State; Zip Code  WILTON, CA 95693	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARNETT, JEREME	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  SCOTTSDALE, AZ 85262	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARTON, BRYAN	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  SPRING CREEK, NV 89815	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARWICK, JEREMY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  BLUFF DALE, TX 76433	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASADRE, CELENA	Amount of Contribution (\$) \$180.00
	Contributor address; City; State; Zip Code  HARRISON, TN 37341	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/231 Rpt: 20/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUER, TERRI ..... <b>6</b> Contributor address; City; State; Zip Code  MANSFIELD, TX 76063	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUER, TERRI ..... Contributor address; City; State; Zip Code  MANSFIELD, TX 76063	Amount of Contribution (\$) \$140.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAYHEAD FARM ..... Contributor address; City; State; Zip Code  NAPLES, FL 34117	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEARD, RICK ..... Contributor address; City; State; Zip Code  DEVOL, OK 73531	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, BOONER ..... Contributor address; City; State; Zip Code  WIMBERLEY, TX 78676	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/231 Rpt: 21/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, BOONER .....  <b>6</b> Contributor address; City; State; Zip Code  WIMBERLEY, TX 78676	<b>7</b> Amount of Contribution (\$)  \$40.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECK, BOONER .....  WIMBERLEY, TX 78676	Amount of Contribution (\$)  \$75.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BEECHFORK RANCH .....  WEATHERFORD, TX 76088	Amount of Contribution (\$)  \$880.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, SPENCE .....  MAYSVILLE, OK 73057	Amount of Contribution (\$)  \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLE TERRE RANCH .....  CORINTH, MS 38834	Amount of Contribution (\$)  \$100.00
	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: 18/231 Rpt: 22/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLE TERRE RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  CORINTH, MS 38834	<b>7</b> Amount of Contribution (\$) \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLEFEUILLE, MOLLY ..... Contributor address; City; State; Zip Code  LIPAN, TX 76462	\$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELLENFANT, GARY ..... Contributor address; City; State; Zip Code  NOVICE, TX 79538	\$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENDELE, DENISE ..... Contributor address; City; State; Zip Code  SAN ANTONIO, TX 78259	\$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENDELE, DENISE ..... Contributor address; City; State; Zip Code  SAN ANTONIO, TX 78259	\$320.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/231 Rpt: 23/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENDELE, DENISE ..... <b>6</b> Contributor address; City; State; Zip Code  SAN ANTONIO, TX 78259	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, BRENDAN ..... Contributor address; City; State; Zip Code  NOTREES, TX 79759	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BENNETT, TATE ..... Contributor address; City; State; Zip Code  HEREFORD, TX 79045	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERGER, NORDA ..... Contributor address; City; State; Zip Code  SIMONTON, TX 77476	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BIEHLE 318 ..... Contributor address; City; State; Zip Code  NORTH VERNON, IN 47265	Amount of Contribution (\$) \$40.00
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: 20/231 Rpt: 24/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISHOP, JEFF	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  HICO, TX 76457	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BISHOP, KIM	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  HICO, TX 76457	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BITTERROOT RANCH	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  LAS VEGAS, NV 89131	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAKE, AUSTIN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  SEYMORE, TX 76380	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAKE, AUSTIN	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  SEYMORE, TX 76380	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/231 Rpt: 25/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANKS, TODD ..... <b>6</b> Contributor address; City; State; Zip Code  TYE, TX 79563	<b>7</b> Amount of Contribution (\$) \$175.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANN, JOEY ..... Contributor address; City; State; Zip Code  HAMPTON, AR 71744	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANTON, DARREN ..... Contributor address; City; State; Zip Code  DALLAS, TX 75205	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLANTON, DARREN ..... Contributor address; City; State; Zip Code  DALLAS, TX 75205	Amount of Contribution (\$) \$320.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLAZING THE WILD PRODUCTIONS ..... Contributor address; City; State; Zip Code  FORT WORTH, TX 76102	Amount of Contribution (\$) \$80.00
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: 22/231 Rpt: 26/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: BLAZING THE WILD PRODUCTIONS	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  FORT WORTH, TX 76102	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: BLAZING THE WILD PRODUCTIONS	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  CANBY, OR 97013	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: BLEVINS, LYNN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  CRESCENT, OK 73028	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: BLISS CREEK RANCH	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  BELLINGHAM, WA 98225	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: BLOUNT, MEL	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code  CLAYSVILLE, PA 15323-1329	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/231 Rpt: 27/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOIS D'ARC BOTTOM RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  WHITEWRIGHT, TX 75491	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOND, BRENT ..... Contributor address; City; State; Zip Code  ANTONITO, CO 81120	\$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONDA, YVONNE ..... Contributor address; City; State; Zip Code  WORBIS TH 37339 Denmark	\$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BONGIORNO, GEORGE ..... Contributor address; City; State; Zip Code  DARIEN, CT 06820	\$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSQUE RANCH ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	\$80.00
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: 24/231 Rpt: 28/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSQUE RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSQUE RANCH ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOSQUE RANCH ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUTONNET, TROY ..... Contributor address; City; State; Zip Code  SALINAS, CA 93908-9302	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWDEN, LINDSAY ..... Contributor address; City; State; Zip Code  LEXINGTON, KY 40511	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/231 Rpt: 29/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOZEMAN, STUART	<b>7</b> Amount of Contribution (\$) \$175.00
	<b>6</b> Contributor address; City; State; Zip Code  IDALOU, TX 79329	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADEN, STEPHEN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  NORTHLAKE, TX 76247	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRANCH, W PETE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  DUBLIN, TX 76446	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRASSEAU, BRIDGET	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  SUNSET, LA 70584	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRECKE, GERALD	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  DORCHESTER, WI 54425-9630	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/231 Rpt: 30/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRECKE, GERALD	<b>7</b> Amount of Contribution (\$) \$200.00
	<b>6</b> Contributor address; City; State; Zip Code  DORCHESTER, WI 54425-9630	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREGMAN LAND AND LIVESTOCK	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code  GREEN CASTLE, MO 63544	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRENGARD, CHRIS	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  PARAGOULD, AR 72450	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRENGARD, CHRIS	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  PARAGOULD, AR 72450	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BREWER, CARA	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  JAY, OK 74346	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/231 Rpt: 31/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRITT, JASON	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  BENSON, NC 27504	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRODY, KAREN	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  SANTA BARBARA, CA 93110	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRODY, KAREN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  SANTA BARBARA, CA 93110	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROKE SPUR	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  PARADISE, TX 76073	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROKE SPUR	Amount of Contribution (\$) \$710.00
	Contributor address; City; State; Zip Code  PARADISE, TX 76073	
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: 28/231 Rpt: 32/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROKEN ARROW LIVESTOCK .....  <b>6</b> Contributor address; City; State; Zip Code  LUSK, WY 82225	<b>7</b> Amount of Contribution (\$) \$120.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROKEN K PROPERTIES .....  Contributor address; City; State; Zip Code  STATESVILLE, NC 28677	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, LAURA .....  Contributor address; City; State; Zip Code  MALVERN, AR 72104	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, LAURA .....  Contributor address; City; State; Zip Code  MALVERN, AR 72104	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, RENE .....  Contributor address; City; State; Zip Code  BATON ROUGE, LA 70821	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/231 Rpt: 33/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, RICKY	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  WARRENTON, VA 20186	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, CHARLES	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code  STEPHENVILLE, TX 76401	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, CHARLES	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  STEPHENVILLE, TX 76401	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCHANAN, JENNIFER	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  ZANESVILLE, OH 43701	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCK CREEK QUARTER HORSES	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code  NEMO, TX 76070	
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: 30/231 Rpt: 34/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCK CREEK QUARTER HORSES .....  <b>6</b> Contributor address; City; State; Zip Code  NEMO, TX 76070	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUCK, JAMES .....  Contributor address; City; State; Zip Code  ROYSE CITY, TX 75189	\$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BULL, BREN .....  Contributor address; City; State; Zip Code  KINGSVILLE, TX 78363	\$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURDETT, JESSICA .....  Contributor address; City; State; Zip Code  LAS VEGAS, NV 89143	\$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURDETT, JESSICA .....  Contributor address; City; State; Zip Code  LAS VEGAS, NV 89143	\$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/231 Rpt: 35/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGER, CHARLES	<b>7</b> Amount of Contribution (\$) \$200.00
	<b>6</b> Contributor address; City; State; Zip Code  CHATSWORTH, GA 30705	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGER, CHARLES	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  CHATSWORTH, GA 30705	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGER, CHARLES	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  CHATSWORTH, GA 30705	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURGESS, JAMES	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  EDMOND, OK 73012	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, DAWSON	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  TARZAN, TX 79783	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/231 Rpt: 36/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURNS, MARK	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  GEARY, OK 73040	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTOLO, MARCUS VINICIUS FRANDI	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTOLO, MARCUS VINICIUS FRANDI	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUTTARS, SOPHIA	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  SNOWVILLE, UT 84336	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYLO, ANDY	Amount of Contribution (\$) \$115.00
	Contributor address; City; State; Zip Code  LESLIE, MO 63056	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/231 Rpt: 37/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C WOLF RANCH	<b>7</b> Amount of Contribution (\$) \$195.00
	<b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C WOLF RANCH	Amount of Contribution (\$) \$190.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C&H RANCH	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  MEXIA, TX 76667	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C4 CUTTING HORSES	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  ROCKY POINT, NC 28457	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C4 CUTTING HORSES	Amount of Contribution (\$) \$280.00
	Contributor address; City; State; Zip Code  ROCKY POINT, NC 28457	
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: 34/231 Rpt: 38/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C4 CUTTING HORSES ..... <b>6</b> Contributor address; City; State; Zip Code  HAMPSTEAD, NC 28443	<b>7</b> Amount of Contribution (\$) \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAIN, CHRIS ..... Contributor address; City; State; Zip Code  CHANCELLOR, AL 36316	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALABRIA, BECKY ..... Contributor address; City; State; Zip Code  KAUFMAN, TX 75142	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALABRIA, BECKY ..... Contributor address; City; State; Zip Code  KAUFMAN, TX 75142	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALABRIA, BECKY ..... Contributor address; City; State; Zip Code  KAUFMAN, TX 75142	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/231 Rpt: 39/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALLAHAN, MCCALL .....  <b>6</b> Contributor address; City; State; Zip Code  YORK, SC 29745	<b>7</b> Amount of Contribution (\$) \$75.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, KENNETH .....  Contributor address; City; State; Zip Code  STRATFORD, OK 74872	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, MARCIE .....  Contributor address; City; State; Zip Code  NORCO, CA 92860	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAMPBELL, MARCIE .....  Contributor address; City; State; Zip Code  NORCO, CA 92860	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARNEY, RICHARD .....  Contributor address; City; State; Zip Code  KEMP, TX 75143	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/231 Rpt: 40/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARPENTER, RYDER	<b>7</b> Amount of Contribution (\$) \$75.00
	<b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
<b>Date</b> 09/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) CARPENTER, TODD	<b>Amount of Contribution (\$)</b> \$300.00
	<b>Contributor address; City; State; Zip Code</b>  NATCHEZ, MS 39120	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) CARPENTER, TODD	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  NATCHEZ, MS 39120	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 09/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLL, RUSS	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  FORNEY, TX 75126	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) CARROLLS CUTTING	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Dennis, TX 76439	
<b>Principal occupation / Job title (See Instructions)</b>		<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: 37/231 Rpt: 41/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARSON, JOEL .....  <b>6</b> Contributor address; City; State; Zip Code  ROSWELL, NM 88201	<b>7</b> Amount of Contribution (\$)  \$40.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARSON, JOEL .....  Contributor address; City; State; Zip Code  ROSWELL, NM 88201	Amount of Contribution (\$)  \$40.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, DONALD .....  Contributor address; City; State; Zip Code  GLEN ROSE, TX 76043	Amount of Contribution (\$)  \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, ELLEN .....  Contributor address; City; State; Zip Code  JACKSON, WY 83001	Amount of Contribution (\$)  \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CARTER, ROY .....  Contributor address; City; State; Zip Code  CROCKETT, TX 75835	Amount of Contribution (\$)  \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/231 Rpt: 42/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAUDILL, JOYCE	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  OCALA, FL 34482	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CERNY, CHANCE	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  BRAZORIA, TX 77422	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAPMAN, DAWN	Amount of Contribution (\$) \$190.00
	Contributor address; City; State; Zip Code  CHANDLER, AZ 85248-4902	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAPPELL, ALAN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  COLLINSVILLE, TX 76233-3719	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHARTIER, JENAY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  MARINE CITY, MI 48039-0182	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/231 Rpt: 43/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHARTIER, KELLE	<b>7</b> Amount of Contribution (\$) \$75.00
	<b>6</b> Contributor address; City; State; Zip Code  MILLSAP, TX 76066	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHASAH CATTLE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  WICHITA FALLS, TX 76308	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHATTERTON, STEVE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  CATLETTSBURG, KY 41129	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHATTERTON, STEVE	Amount of Contribution (\$) \$410.00
	Contributor address; City; State; Zip Code  CATLETTSBURG, KY 41129	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHIARELLI, CARLY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  LIPAN, TX 76462	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/231 Rpt: 44/249	
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041	
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDERS, MARK ..... <b>6</b> Contributor address; City; State; Zip Code  BOWIE, TX 76230	<b>7</b> Amount of Contribution (\$) \$100.00	
	<b>8</b> Principal occupation / Job title (See Instructions) Owner		
<b>9</b> Employer (See Instructions) Owner	<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDERS, MARK ..... <b>Contributor address; City; State; Zip Code</b>  BOWIE, TX 76230	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDERS, MIKE ..... <b>Contributor address; City; State; Zip Code</b>  BOWIE, TX 76230	<b>Amount of Contribution (\$)</b> \$100.00	
	<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) CHILDRESS, THOMAS ..... <b>Contributor address; City; State; Zip Code</b>  FORT WORTH, TX 76179	<b>Amount of Contribution (\$)</b> \$40.00	
	<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) CHOATE, CURTIS ..... <b>Contributor address; City; State; Zip Code</b>  MIDLAND, TX 79706	<b>Amount of Contribution (\$)</b> \$20.00	
	<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/231 Rpt: 45/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHOCRON-AROCHA, MARCOS	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  ALEDO, TX 76008	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRIS AND DEBBIE SWAIN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  STEPHENVILLE, TX 76401	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRIS, SWAIN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  STEPHENVILLE, TX 76401	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTENSEN, CHARLOTTE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76086	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHRISTENSEN, M J	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  WALTON, NE 68461	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 42/231 Rpt: 46/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHURCH, MARGARITA	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  COLUMBUS, MT 59019	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) CIRCLE C LIVESTOCK	<b>Amount of Contribution (\$)</b> \$175.00
	<b>Contributor address; City; State; Zip Code</b>  LAPORTE, TX 77571	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) CIRCLE C LIVESTOCK	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  LAPORTE, TX 77571	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) CIRCLE Y RANCH	<b>Amount of Contribution (\$)</b> \$300.00
	<b>Contributor address; City; State; Zip Code</b>  MILLSAP, TX 76066	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) CIRCLE Y RANCH	<b>Amount of Contribution (\$)</b> \$300.00
	<b>Contributor address; City; State; Zip Code</b>  MILLSAP, TX 76066	
<b>Principal occupation / Job title (See Instructions)</b>		<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: 43/231 Rpt: 47/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CIRCLE Y RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  MILLSAP, TX 76066	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, BARRY ..... Contributor address; City; State; Zip Code  DRIPPING SPRINGS, TX 78620	\$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, CYDНИЕ ..... Contributor address; City; State; Zip Code  FREEDOM, WY 83120	\$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, RODGER ..... Contributor address; City; State; Zip Code  FOUNTAIN INN, SC 29644-9727	\$190.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARK, RODGER ..... Contributor address; City; State; Zip Code  FOUNTAIN INN, SC 29644-9727	\$550.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 44/231 Rpt: 48/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARKE BUTTE RANCH .....  <b>6</b> Contributor address; City; State; Zip Code  BEND, OR 97703	<b>7</b> Amount of Contribution (\$) \$75.00
	<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLARKE BUTTE RANCH .....  Contributor address; City; State; Zip Code  BEND, OR 97703	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAYDEN, HOLLY .....  Contributor address; City; State; Zip Code  LOOMBERAH NS 002340 Australia	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CLAYDEN, HOLLY .....  Contributor address; City; State; Zip Code  LOOMBERAH NS 02340 Australia	Amount of Contribution (\$) \$195.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COALSON ACRES .....  Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$325.00
	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: 45/231 Rpt: 49/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COAST PERFORMANCE HORSES .....  <b>6</b> Contributor address; City; State; Zip Code  LANGLEY TWP BC V2Z2G7 Canada	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFEEN, EMILY .....  Contributor address; City; State; Zip Code  JOSHUA, TX 76058	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COFFEY, KATHERINE .....  Contributor address; City; State; Zip Code  MARIETTA, OK 73448	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COGDELL, COLTON .....  Contributor address; City; State; Zip Code  TULIA, TX 79088	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COGDELL, JIM .....  Contributor address; City; State; Zip Code  TULIA, TX 79088-4907	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 46/231 Rpt: 50/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, KAREN	<b>7</b> Amount of Contribution (\$) \$115.00
	<b>6</b> Contributor address; City; State; Zip Code  BATESVILLE, MS 38606	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
<b>Date</b> 09/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) COLGROVE, JOEL	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  BOLIGEE, AL 35443	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 09/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) COLGROVE, JOEL	<b>Amount of Contribution (\$)</b> \$475.00
	<b>Contributor address; City; State; Zip Code</b>  BOLIGEE, AL 35443	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) COLGROVE, JOEL	<b>Amount of Contribution (\$)</b> \$500.00
	<b>Contributor address; City; State; Zip Code</b>  BOLIGEE, AL 35443	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 09/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, PATRICK	<b>Amount of Contribution (\$)</b> \$40.00
	<b>Contributor address; City; State; Zip Code</b>  LINCOLN, IL 62656	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 47/231 Rpt: 51/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, PATRICK ..... <b>6</b> Contributor address; City; State; Zip Code  LINCOLN, IL 62656	<b>7</b> Amount of Contribution (\$) \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLLINS, QUINN ..... Contributor address; City; State; Zip Code  WASHINGTON, TX 77880	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, JENNIFER ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, LAUREN ..... Contributor address; City; State; Zip Code  SHINGLE SPRINGS, CA 95682-1082	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOPER, MICHAEL ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 48/231 Rpt: 52/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORKSCREW RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  NAPA, CA 94558	<b>7</b> Amount of Contribution (\$) \$140.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORKSCREW RANCH ..... Contributor address; City; State; Zip Code  NAPA, CA 94558	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORKSCREW RANCH ..... Contributor address; City; State; Zip Code  NAPA, CA 94558	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORKSCREW RANCH ..... Contributor address; City; State; Zip Code  NAPA, CA 94558	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORVIN, ZEB ..... Contributor address; City; State; Zip Code  CANYON, TX 79015-6372	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 49/231 Rpt: 53/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORVIN, ZEB	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  CANYON, TX 79015-6372	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORVIN, ZEB	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code  CANYON, TX 79015-6372	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CORVIN, ZEB	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  CANYON, TX 79015-6372	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COSTANZA, MALISSA	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  OKMULGEE, OK 74447	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COSTELLO, CHLOE ANITA	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  KAUFMAN, TX 75142	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 50/231 Rpt: 54/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COSTELLO, CHLOE ANITA	<b>7</b> Amount of Contribution (\$) \$75.00
	<b>6</b> Contributor address; City; State; Zip Code  KAUFMAN, TX 75142	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COSTELLO, MINDY	Amount of Contribution (\$) \$115.00
	Contributor address; City; State; Zip Code  KAUFMAN, TX 75142	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COUNTRY BOY SYNDICATE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  LIPAN, TX 76462	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN RANCH	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  ARDMORE, OK 73402	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN RANCH	Amount of Contribution (\$) \$375.00
	Contributor address; City; State; Zip Code  ARDMORE, OK 73402	
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: 51/231 Rpt: 55/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  PAYSON, AZ 85541	<b>7</b> Amount of Contribution (\$) \$80.00
	<b>8</b> Principal occupation / Job title (See Instructions) <b>9</b> Employer (See Instructions)	
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWS & HORSES ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$300.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWS & HORSES ETC ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWS & HORSES ETC ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, CHRISTINA ..... Contributor address; City; State; Zip Code  MARIETTA, OK 73448-7217	Amount of Contribution (\$) \$175.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Owner Owner	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 52/231 Rpt: 56/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, CHRISTINA	<b>7</b> Amount of Contribution (\$) \$175.00
	<b>6</b> Contributor address; City; State; Zip Code  MARIETTA, OK 73448-7217	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, THAD	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  PURCELL, OK 73080-9630	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG-SMITH, TAMMY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  JOHNS ISLAND, SC 29455	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, JIM	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  LEXINGTON, NE 68850-5513	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAWFORD, SHANE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  MT OLIVE, MS 39119	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 53/231 Rpt: 57/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROCKETT SAND & GRAVEL ..... <b>6</b> Contributor address; City; State; Zip Code  CROCKETT, TX 75835	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROSSEN, LISA ..... Contributor address; City; State; Zip Code  GAINESVILLE, TX 76240	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROW, TRYSTAN ..... Contributor address; City; State; Zip Code  DIMMITT, TX 79027	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CROWN RANCH ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUMPLER BROTHERS ..... Contributor address; City; State; Zip Code  WICHITA FALLS, TX 76305	Amount of Contribution (\$) \$75.00
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: 54/231 Rpt: 58/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUMPLER, DILLON ..... <b>6</b> Contributor address; City; State; Zip Code  WICHITA FALLS, TX 76305	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRUMPLER, DILLON ..... Contributor address; City; State; Zip Code  WICHITA FALLS, TX 76305	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTISS, ROPER ..... Contributor address; City; State; Zip Code  SCOTTSDALE, AZ 85262	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTISS, ROPER ..... Contributor address; City; State; Zip Code  SCOTTSDALE, AZ 85262	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CURTS, JULIE ..... Contributor address; City; State; Zip Code  KRUM, TX 76249	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 55/231 Rpt: 59/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CUSICK, SCOTT	<b>7</b> Amount of Contribution (\$) \$215.00
	<b>6</b> Contributor address; City; State; Zip Code  SPICEWOOD, TX 78669	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DACOLE INVESTMENT COMPANY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  RENO, NV 89519	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DACOLE INVESTMENT COMPANY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  RENO, NV 89519	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALE, CLAIRE	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  COLLINS, MS 39428	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DALE, CLAIRE	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  COLLINS, MS 39428	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 56/231 Rpt: 60/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANGELMAYR, MARY	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  MUENSTER, TX 76252-3301	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAOUD, KHADER	Amount of Contribution (\$) \$215.00
	Contributor address; City; State; Zip Code  CRESTVIEW, FL 32536	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAOUD, KHADER	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  CRESTVIEW, FL 32536	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAOUD, KHADER	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  CRESTVIEW, FL 32536	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DARE, LAURA	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  PURCELL, OK 73080	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 57/231 Rpt: 61/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVID, TRAVIS	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  HOUma, LA 70360	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, JONATHAN	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  BUSHLAND, TX 79124-1352	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, KIM	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS, MARTY	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code  CROSBYTON, TX 79322	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVISON YOUNG PARTNERSHIP	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  HEATH, TX 75032	
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: 58/231 Rpt: 62/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAY, JIMMY	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  JACKSBORO, TX 76458	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE CORDOVA CATTLE CO	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  GROSEBECK, TX 76642	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DE CORDOVA, CODY	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code  GROESBECK, TX 76642-0517	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEEP CREEK PERFORMANCE HORSES	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  SNYDER, TX 79549	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEEP IN THE DIRT ENTERPRISES	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code  MILLICAN, TX 77866-0598	
Principal occupation / Job title (See Instructions) Owner		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: 59/231 Rpt: 63/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEEP IN THE DIRT ENTERPRISES .....  <b>6</b> Contributor address; City; State; Zip Code  MILLICAN, TX 77866-0598	<b>7</b> Amount of Contribution (\$)  \$70.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEHAAN, CH .....  Contributor address; City; State; Zip Code  SCOTTSDALE, AZ 85255-5062	\$101.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEHOFF, COURtenay .....  Contributor address; City; State; Zip Code  DALLAS, TX 75219	\$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEINES, JONAH .....  Contributor address; City; State; Zip Code  LAUREL, MT 59044	\$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DETLOFF, THOMAS .....  Contributor address; City; State; Zip Code  SIOUX FALLS, SD 57104	\$55.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 60/231 Rpt: 64/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIAMOND LAND & CATTLE .....  <b>6</b> Contributor address; City; State; Zip Code  SHREVEPORT, LA 71101	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIEHL, ORA .....  Contributor address; City; State; Zip Code  RUSKIN, FL 33570	\$525.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIETRICH, MICHAELLA .....  Contributor address; City; State; Zip Code  FREDERICKSBURG, TX 78624	\$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOBBELS, ADAM .....  Contributor address; City; State; Zip Code  BLANCHARD, OK 73010	\$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOERING, MALTE .....  Contributor address; City; State; Zip Code  MARL NW 045772 Denmark	\$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 61/231 Rpt: 65/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOERING, MALTE .....  <b>6</b> Contributor address; City; State; Zip Code  MARL NW 045772 Denmark	<b>7</b> Amount of Contribution (\$) \$75.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOING, VERLIE .....  Contributor address; City; State; Zip Code  JACKSBORO, TX 76458	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOMANN, DEAN .....  Contributor address; City; State; Zip Code  GAINESVILLE, TX 76240	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOSS, PHIL .....  Contributor address; City; State; Zip Code  SPRINGTOWN, TX 76082	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOSS, PHIL .....  Contributor address; City; State; Zip Code  SPRINGTOWN, TX 76082	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 62/231 Rpt: 66/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUBLE B RANCH .....  <b>6</b> Contributor address; City; State; Zip Code  MONTGOMERY, AL 36117	<b>7</b> Amount of Contribution (\$) \$195.00
	<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUBLE B RANCH .....  MONTGOMERY, AL 36117	Amount of Contribution (\$) \$120.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUBLE DOWN HORSE RANCH .....  Payson, UT 84651	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOUBLE G CUTTING .....  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$95.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRAKE, REBECCA .....  HOUSTON, TX 77042	Amount of Contribution (\$) \$120.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 63/231 Rpt: 67/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRUMMOND, MELISSA ..... <b>6</b> Contributor address; City; State; Zip Code  PAWHUSKA, OK 74056	<b>7</b> Amount of Contribution (\$) \$120.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DRUMMOND, TIM ..... Contributor address; City; State; Zip Code  PAWHUSKA, OK 74056	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUBOIS, JUDE ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUBOIS, JUDE ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFURRENA, ED ..... Contributor address; City; State; Zip Code  GAINESVILLE, TX 76240	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 64/231 Rpt: 68/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFURRENA, ED	<b>7</b> Amount of Contribution (\$) \$150.00
	<b>6</b> Contributor address; City; State; Zip Code  GAINESVILLE, TX 76240	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFURRENA, ED	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  GAINESVILLE, TX 76240	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUKES, MATTIE MARIE	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  FORT WORTH, TX 76109	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, TIM	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  SPERRY, OK 74073	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DVORAK, ALYSSA	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 65/231 Rpt: 69/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E SQUARED PERFORMANCE HORSES .....  <b>6</b> Contributor address; City; State; Zip Code  OGDEN, UT 84404	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EASON, C R 'HOPPY' .....  Contributor address; City; State; Zip Code  MERIDIAN, TX 76665	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EASON, C R 'HOPPY' .....  Contributor address; City; State; Zip Code  MERIDIAN, TX 76665	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EASON, C R 'HOPPY' .....  Contributor address; City; State; Zip Code  MERIDIAN, TX 76665	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EASTERLY, ZACH .....  Contributor address; City; State; Zip Code  STRAFFORD, MO 65757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 66/231 Rpt: 70/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EATON, MICHAEL	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  DANVILLE, IN 46122	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EATON, MICHAEL	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  DANVILLE, IN 46122	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, JUSTIN	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  CALVERT CITY, KY 42029	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EDWARDS, ROSS	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  LOUISVILLE, NE 68037	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EE RANCHES	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  WHITESBORO, TX 76273	
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: 67/231 Rpt: 71/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EL CID LAND & CATTLE CO .....  <b>6</b> Contributor address; City; State; Zip Code  CLOVIS, NM 88102-1907	<b>7</b> Amount of Contribution (\$) \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELROD, RUSSELL .....  Contributor address; City; State; Zip Code  GRAHAM, TX 76450	\$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EMERSON, CORY .....  Contributor address; City; State; Zip Code  DALLAS, TX 75225	\$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EMERSON, CORY .....  Contributor address; City; State; Zip Code  DALLAS, TX 75225	\$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENTERPRISE LIVESTOCK .....  Contributor address; City; State; Zip Code  GENEVA, AL 36340	\$40.00
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: 68/231 Rpt: 72/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENTZ, ZEKE	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  COLLIERVILLE, TN 38017	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) EQUINE BLANKET WASH & REPAIR	<b>Amount of Contribution (\$)</b> \$75.00
	<b>Contributor address; City; State; Zip Code</b>  BROCK, TX 76087	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) EQUINE BLANKET WASH & REPAIR	<b>Amount of Contribution (\$)</b> \$75.00
	<b>Contributor address; City; State; Zip Code</b>  BROCK, TX 76087	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) ERENBERG, LIANA	<b>Amount of Contribution (\$)</b> \$95.00
	<b>Contributor address; City; State; Zip Code</b>  SANTA YNEZ, CA 93460	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 09/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTES, LLOYD	<b>Amount of Contribution (\$)</b> \$150.00
	<b>Contributor address; City; State; Zip Code</b>  SPRINGTOWN, TX 76082-1235	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 69/231 Rpt: 73/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTES, LLOYD	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  SPRINGTOWN, TX 76082-1235	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ESTES, LLOYD	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  SPRINGTOWN, TX 76082-1235	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EZELL, KIM	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  PERRIN, TX 76486	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FACINCANI, DAVIDE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FACINCANI, DAVIDE	Amount of Contribution (\$) \$175.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 70/231 Rpt: 74/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARM 4754 LIVING TRUST ..... <b>6</b> Contributor address; City; State; Zip Code  SHELBY, NC 28150	<b>7</b> Amount of Contribution (\$) \$75.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FARMER, MAXINE ..... Contributor address; City; State; Zip Code  ORLA, TX 79770	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAZENDA BARRINHA ..... Contributor address; City; State; Zip Code  MINERAL WELLS, TX 76067	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FAZENDA BARRINHA ..... Contributor address; City; State; Zip Code  MINERAL WELLS, TX 76067	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUSON, SCOTT ..... Contributor address; City; State; Zip Code  HEMPSTEAD, TX 77445-9516	Amount of Contribution (\$) \$190.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 71/231 Rpt: 75/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FERGUSON, SCOTT ..... <b>6</b> Contributor address; City; State; Zip Code  HEMPSTEAD, TX 77445-9516	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELD, HAILEY ..... Contributor address; City; State; Zip Code  CANYON, TX 79015	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELDS, GARY ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIRE SNAKE PERFORMANCE HORSES ..... Contributor address; City; State; Zip Code  ALEDO, TX 76008	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FISCHER PERFORMANCE HORSES ..... Contributor address; City; State; Zip Code  ROCKVIEW COUNTY AB T4C2Z6 Canada	Amount of Contribution (\$) \$50.00
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: 72/231 Rpt: 76/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITZPATRICK, SHEILA ..... <b>6</b> Contributor address; City; State; Zip Code  EAGLE, CO 81631	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITZSIMMONS, TOM ..... Contributor address; City; State; Zip Code  PAGOSA SPGS, CO 81147	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLOWERS, STAN ..... Contributor address; City; State; Zip Code  DEXTER, MO 63841	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLYNN, SEAN ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76086	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLYNN, SEAN ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76086	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 73/231 Rpt: 77/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: FOLAND, JENNIFER CHRISTMANN .....  WEATHERFORD, TX 76088	<b>7</b> Amount of Contribution (\$) \$150.00
	<b>6</b> Contributor address; City; State; Zip Code	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: FOLAND, JENNIFER CHRISTMANN .....  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$220.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: FOLAND, JENNIFER CHRISTMANN .....  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: FOLSOM, EDGAR .....  BAXLEY, GA 31513	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: FONSEN YOUNG, KATIE .....  POTTER VALLEY, CA 95469	Amount of Contribution (\$) \$95.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 74/231 Rpt: 78/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FORST, TERRY ..... <b>6</b> Contributor address; City; State; Zip Code  WAURIKA, OK 73573	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOSTER, MATTE ..... Contributor address; City; State; Zip Code  WICKENBURG, AZ 85390	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FR RAWLEY SD ..... Contributor address; City; State; Zip Code  IPAVA, IL 61441	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FREEMAN, KATHRYN JOY ..... Contributor address; City; State; Zip Code  POOLVILLE, TX 76487	Amount of Contribution (\$) \$75.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRICKE, TREY ..... Contributor address; City; State; Zip Code  DALLAS, TX 75254	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 75/231 Rpt: 79/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRICKE, TREY	<b>7</b> Amount of Contribution (\$) \$175.00
	<b>6</b> Contributor address; City; State; Zip Code  DALLAS, TX 75254	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRICKE, TREY	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code  DALLAS, TX 75254	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRIZZELL, KAYLYN	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  STERLING CITY, TX 76951	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUENTES, SYLVIA	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  PLANO, TX 75093	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUENTES, SYLVIA	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  PLANO, TX 75093	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 76/231 Rpt: 80/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULTON QUIEN SABE RANCHES .....  <b>6</b> Contributor address; City; State; Zip Code  LUBBOCK, TX 79424	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULTS RANCH .....  Contributor address; City; State; Zip Code  ALEDO, TX 76008	Amount of Contribution (\$) \$580.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULTS RANCH LTD .....  Contributor address; City; State; Zip Code  ALEDO, TX 76008	Amount of Contribution (\$) \$605.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FUNDERBURGH, BEVERLY .....  Contributor address; City; State; Zip Code  STEPHENVILLE, TX 76401	Amount of Contribution (\$) \$140.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLAZZI, GIULIO .....  Contributor address; City; State; Zip Code  MILAN MI 020121 Italy	Amount of Contribution (\$) \$140.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 77/231 Rpt: 81/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALLAZZI, GIULIO	<b>7</b> Amount of Contribution (\$) \$140.00
	<b>6</b> Contributor address; City; State; Zip Code  MILAN MI 20121 Italy	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALYEAN, BEAU	Amount of Contribution (\$) \$175.00
	Contributor address; City; State; Zip Code  FORT WORTH, TX 76140	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALYEAN, BECKY	Amount of Contribution (\$) \$95.00
	Contributor address; City; State; Zip Code  PURCELL, OK 73080	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALYEAN, BRIDGET	Amount of Contribution (\$) \$175.00
	Contributor address; City; State; Zip Code  MARIETTA, OK 73448	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALYEAN, GIL	Amount of Contribution (\$) \$115.00
	Contributor address; City; State; Zip Code  PURCELL, OK 73080	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 78/231 Rpt: 82/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALYEAN, GRACELYN	<b>7</b> Amount of Contribution (\$) \$75.00
	<b>6</b> Contributor address; City; State; Zip Code  CLAREMORE, OK 74017	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALYEAN, KRISTEN	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code  CLAREMORE, OK 74017	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALYEAN, WESLEY	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code  CLAREMORE, OK 74017	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GALYEAN, WESLEY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  CLAREMORE, OK 74017	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, HOLLY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  FT CAMPBELL, KY 42223	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 79/231 Rpt: 83/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, MARK	<b>7</b> Amount of Contribution (\$) \$180.00
	<b>6</b> Contributor address; City; State; Zip Code  ASHLAND, KS 67831	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, MARK	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code  ASHLAND, KS 67831	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, GRANT	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  BIRMINGHAM, AL 35244	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, GRANT	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  BIRMINGHAM, AL 35244	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARDNER, GRANT	Amount of Contribution (\$) \$220.00
	Contributor address; City; State; Zip Code  BIRMINGHAM, AL 35244	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 80/231 Rpt: 84/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARRETT, JADEYN .....  <b>6</b> Contributor address; City; State; Zip Code  WALLIS, TX 77485	<b>7</b> Amount of Contribution (\$)  \$40.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAUGHAN, BARBARA .....  Contributor address; City; State; Zip Code  LAS VEGAS, NV 89148	Amount of Contribution (\$)  \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAUGHAN, JOHN .....  Contributor address; City; State; Zip Code  LAS VEGAS, NV 89148	Amount of Contribution (\$)  \$75.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GAUGHAN, PAULA .....  Contributor address; City; State; Zip Code  LAS VEGAS, NV 89134-6326	Amount of Contribution (\$)  \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GCH LAND & CATTLE .....  Contributor address; City; State; Zip Code  WARREN, MI 48089	Amount of Contribution (\$)  \$200.00
	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: 81/231 Rpt: 85/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GCH LAND & CATTLE CO .....  <b>6</b> Contributor address; City; State; Zip Code  WARREN, MI 48089	<b>7</b> Amount of Contribution (\$)  \$300.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
<b>Date</b> 09/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) GERHARDY, AUSTRIA ARNOLD .....  <b>Contributor address; City; State; Zip Code</b>  TERRELL, TX 75160	<b>Amount of Contribution (\$)</b>  \$20.00
	<b>Principal occupation / Job title (See Instructions)</b> Owner	<b>Employer (See Instructions)</b> Owner
<b>Date</b> 09/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) GERHARDY, AUSTRIA ARNOLD .....  <b>Contributor address; City; State; Zip Code</b>  TERRELL, TX 75160	<b>Amount of Contribution (\$)</b>  \$75.00
	<b>Principal occupation / Job title (See Instructions)</b> Owner	<b>Employer (See Instructions)</b> Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) GERHARDY, AUSTRIA ARNOLD .....  <b>Contributor address; City; State; Zip Code</b>  TERRELL, TX 75160	<b>Amount of Contribution (\$)</b>  \$20.00
	<b>Principal occupation / Job title (See Instructions)</b> Owner	<b>Employer (See Instructions)</b> Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) GIANNUKOS, JOHN .....  <b>Contributor address; City; State; Zip Code</b>  HOUSTON, TX 77263-0336	<b>Amount of Contribution (\$)</b>  \$40.00
	<b>Principal occupation / Job title (See Instructions)</b> Owner	<b>Employer (See Instructions)</b> Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 82/231 Rpt: 86/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLEN, SYLVIA	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLIT LAND & LIVESTOCK	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  HOLLIDAY, TX 76366	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLOCK, THERESA	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLENN, JAIME	Amount of Contribution (\$) \$600.00
	Contributor address; City; State; Zip Code  PASO ROBLES, CA 93446	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLENN, REAGAN	Amount of Contribution (\$) \$175.00
	Contributor address; City; State; Zip Code  PASO ROBLES, CA 93446	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 83/231 Rpt: 87/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLENN, REAGAN	<b>7</b> Amount of Contribution (\$) \$195.00
	<b>6</b> Contributor address; City; State; Zip Code  PASO ROBLES, CA 93446	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLENN, REAGAN	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  PASO ROBLES, CA 93446	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLOVER/GALYEAN PARTNERSHIP	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  CLAREMORE, OK 74017	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GLOVER/GALYEAN PARTNERSHIP	Amount of Contribution (\$) \$175.00
	Contributor address; City; State; Zip Code  CLAREMORE, OK 74017	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOFORTH, LYNN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  MAX MEADOWS, VA 24360	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 84/231 Rpt: 88/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOFORTH, LYNN .....  <b>6</b> Contributor address; City; State; Zip Code  MAX MEADOWS, VA 24360	<b>7</b> Amount of Contribution (\$)  \$40.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOFORTH, LYNN .....  Contributor address; City; State; Zip Code  MAX MEADOWS, VA 24360	Amount of Contribution (\$)  \$40.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODMAN, SAMANTHA .....  Contributor address; City; State; Zip Code  LAS VEGAS, NV 89120	Amount of Contribution (\$)  \$75.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODMAN, SAMANTHA .....  Contributor address; City; State; Zip Code  LAS VEGAS, NV 89120	Amount of Contribution (\$)  \$75.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GOODWIN, DARA .....  Contributor address; City; State; Zip Code  GRIFFIN, GA 30224	Amount of Contribution (\$)  \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 85/231 Rpt: 89/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORDON, JOE	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  CANTON, OH 44735	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAHAM, BLAKE	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code  ROCKLEDGE, GA 30454	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRAY-UNRUH, TAMMY	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  WILMORE, KS 67155	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, CASEY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  PERRIN, TX 76486-7972	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREEN, TERRY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  SUGAR LAND, TX 77487-2788	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 86/231 Rpt: 90/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGSON, MISTY	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code  TULSA, OK 74105	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY RANCHES	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code  FRUITA, CO 81521	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, MICHAEL	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  ROCIADA, NM 87742	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GREGORY, MICHAEL	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  ROCIADA, NM 87742	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROVER, TRAVIS	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  CRESCO, IA 52136	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 87/231 Rpt: 91/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GROVER, TRAVIS	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  CRESCO, IA 52136	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GS CUTTING HORSES	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code  GRANDVIEW, TX 76050	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUIMARAES, MARCUS V TENORIO	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  MACEIO AL 5703864 Brazil	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUIMARAES, MARCUS V TENORIO	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  MACEIO AL 5703864 Brazil	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUIMARAES, MARCUS V TENORIO	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  MACEIO AL 5703864 Brazil	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 88/231 Rpt: 92/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUITAR RANCHES ..... <b>6</b> Contributor address; City; State; Zip Code  ABILENE, TX 79604	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUITAR RANCHES ..... Contributor address; City; State; Zip Code  ABILENE, TX 79604	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ, JUDY ..... Contributor address; City; State; Zip Code  SPRINGTOWN, TX 76082-1884	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUTIERREZ, JUDY ..... Contributor address; City; State; Zip Code  SPRINGTOWN, TX 76082-1884	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, LEW ..... Contributor address; City; State; Zip Code  HIGHLAND CITY, FL 33846	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 89/231 Rpt: 93/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSELMAN, SUSAN ..... <b>6</b> Contributor address; City; State; Zip Code  PIEDMONT, OK 73078	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSMA, WINSTON ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HANSON, DAVID ..... Contributor address; City; State; Zip Code  DULUTH, MN 55803	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARTSELL, GARY ..... Contributor address; City; State; Zip Code  TENAHA, TX 75974	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASELIP, DWAYNE ..... Contributor address; City; State; Zip Code  WHITESBORO, TX 76273	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 90/231 Rpt: 94/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HASKINS, SANDY	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  CLEMENTS, CA 95227-0307	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWKINS, MARY JO	Amount of Contribution (\$) \$175.00
	Contributor address; City; State; Zip Code  SEGUIN, TX 78155	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAWORTH, JIM	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  SOUTHWEST CITY, MO 64863-0187	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYDEN, TROY	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  GILLETTE, WY 82717	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAZELL, MARGOT	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code  DENTON, TX 76207	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 91/231 Rpt: 95/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: HE REINS QUARTER HORSES Contributor address; City; State; Zip Code MISOULA, MT 59808	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: HE REINS QUARTER HORSES Contributor address; City; State; Zip Code MISOULA, MT 59808	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: HE REINS QUARTER HORSES Contributor address; City; State; Zip Code MISOULA, MT 59808	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: HEAPHY, HAYDEN Contributor address; City; State; Zip Code SHERIDAN, WY 82801	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: HEARTS FROM HEAVEN Contributor address; City; State; Zip Code HARTVILLE, OH 44632	Amount of Contribution (\$) \$80.00
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: 92/231 Rpt: 96/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEID, MIKE	<b>7</b> Amount of Contribution (\$) \$215.00
	<b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) HEID, MIKE	<b>Amount of Contribution (\$)</b> \$115.00
	<b>Contributor address; City; State; Zip Code</b>  WEATHERFORD, TX 76088	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON-PERRY, SUSAN	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  MULHALL, OK 73063	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) HENRICHES, DANIEL	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  BLACK HAWK, SD 57718	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 09/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) HENSLEY, DARRELL	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  CLAREMORE, OK 74019	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 93/231 Rpt: 97/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENSLEY, DARRELL	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  CLAREMORE, OK 74019	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEROLD, THOMAS	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code  WEST POINT, IA 52656-9801	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERZKE, KEVIN	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  GERMANTOWN, TN 38139	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGBEE, BRENDA	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  REDMOND, OR 97756	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGBEE, BRENDA	Amount of Contribution (\$) \$115.00
	Contributor address; City; State; Zip Code  REDMOND, OR 97756	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 94/231 Rpt: 98/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGGINBOTTOM, PAUL	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  ASH FLAT, AR 72513	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, DOTTIE ST CLAIR	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  GLEN ROSE, TX 76043	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 09/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, JAMIE	<b>Amount of Contribution (\$)</b> \$150.00
	<b>Contributor address; City; State; Zip Code</b>  BASTROP, TX 78602	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 09/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) HILL, JAMIE	<b>Amount of Contribution (\$)</b> \$200.00
	<b>Contributor address; City; State; Zip Code</b>  BASTROP, TX 78602	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 09/11/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) HIMSEL, BARBARA	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  DANVILLE, IN 46122	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 95/231 Rpt: 99/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HODGES, CINDY ..... <b>6</b> Contributor address; City; State; Zip Code  ADEL, GA 31620-7689	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOELSCHER, MELISSA ..... Contributor address; City; State; Zip Code  KERRVILLE, TX 78028	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOFELDT, JOHN ..... Contributor address; City; State; Zip Code  GREEN RIVER, WY 82935	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLDEN, DEAN ..... Contributor address; City; State; Zip Code  MARIETTA, OK 73448	Amount of Contribution (\$) \$190.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLDEN, DEAN ..... Contributor address; City; State; Zip Code  MARIETTA, OK 73448	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 96/231 Rpt: 100/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLDEN, DEAN	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  MARIETTA, OK 73448	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMES, LINDA	Amount of Contribution (\$) \$400.00
	Contributor address; City; State; Zip Code  LONGMONT, CO 80503	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMES, SPENCER	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  HIGHLAND, UT 84003	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLZGRAF, CHRIS	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  SAN ANGELO, TX 76906	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOF & WHEEL	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  WEMBLEY AB T0H3S0 Canada	
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: 97/231 Rpt: 101/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, JAMES ..... <b>6</b> Contributor address; City; State; Zip Code  DECATUR, AL 35603	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, JAMES ..... Contributor address; City; State; Zip Code  DECATUR, AL 35603	Amount of Contribution (\$) \$200.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOOPER, KYLE ..... Contributor address; City; State; Zip Code  ANDREWS, TX 79714	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORN, ERNEST ..... Contributor address; City; State; Zip Code  CREOLE, LA 70632-2955	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTON, RICK ..... Contributor address; City; State; Zip Code  NEVADA, TX 75173	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 98/231 Rpt: 102/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORTON, RICK	<b>7</b> Amount of Contribution (\$) \$280.00
	<b>6</b> Contributor address; City; State; Zip Code  NEVADA, TX 75173	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUETT, AUSTIN	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  BENTONVILLE, AR 72713	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULBERT, JEAN LUXFORD	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  GRASS VALLEY, OR 97029	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULME, SCOTT	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  VERNON, TX 76384-2577	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNT, WILLIAM	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  WALLER, TX 77484	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 99/231 Rpt: 103/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUNT, WILLIAM	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  WALLER, TX 77484	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HURT, COURTNEY	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  WILLOW PARK, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HUSEMAN, TUCKER	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  ELLSWORTH, KS 67439	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) INGRAM, JEREMY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  ARDMORE, OK 73401	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRBY, RICHARD	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  SULPHUR SPRINGS, TX 75482	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 100/231 Rpt: 104/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRBY, RICHARD	<b>7</b> Amount of Contribution (\$) \$175.00
	<b>6</b> Contributor address; City; State; Zip Code  SULPHUR SPRINGS, TX 75482	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRBY, RICHARD	Amount of Contribution (\$) \$295.00
	Contributor address; City; State; Zip Code  SULPHUR SPRINGS, TX 75482	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRON HEART PERFORMANCE HORSES	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRON HEART PERFORMANCE HORSES	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRON HEART PERFORMANCE HORSES	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
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: 101/231 Rpt: 105/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRON HEART PERFORMANCE HORSES .....  <b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	<b>7</b> Amount of Contribution (\$)  \$520.00
	<b>8</b> Principal occupation / Job title (See Instructions) <b>9</b> Employer (See Instructions)	
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRON ROSE RANCH .....  Contributor address; City; State; Zip Code  CARBONDALE, CO 81623	Amount of Contribution (\$)  \$500.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRON ROSE RANCH .....  Contributor address; City; State; Zip Code  CARBONDALE, CO 81623	Amount of Contribution (\$)  \$200.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IRONROCK RANCH .....  Contributor address; City; State; Zip Code  MILLSAP, TX 76066	Amount of Contribution (\$)  \$400.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ISRAEL, CHARLES .....  Contributor address; City; State; Zip Code  BIRMINGHAM, AL 35223	Amount of Contribution (\$)  \$100.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Owner Owner	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 102/231 Rpt: 106/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J FIVE HORSE RANCH MGMT ..... <b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	<b>7</b> Amount of Contribution (\$) \$150.00
	<b>8</b> Principal occupation / Job title (See Instructions) <b>9</b> Employer (See Instructions)	
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J FIVE HORSE RANCH MGMT ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$200.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J FIVE HORSE RANCH MGMT ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J FIVE HORSE RANCH MGMT ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$1,025.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J+ RANCHES ..... Contributor address; City; State; Zip Code  HUNTSVILLE, TX 77340	Amount of Contribution (\$) \$100.00
	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: 103/231 Rpt: 107/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J+ RANCHES	<b>7</b> Amount of Contribution (\$) \$300.00
	<b>6</b> Contributor address; City; State; Zip Code  HUNTSVILLE, TX 77340	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKPOT RANCH WEATHERFORD	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  SUGAR LAND, TX 77487-2788	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMES, TREW	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  DALHART, TX 79022	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JAMESON, TINA	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  VILAS, NC 28692	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JANSSEN PERFORMANCE HORSES	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  RUSH CITY, MN 55069	
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: 104/231 Rpt: 108/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JARNAGIN, KENT	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  PROTECTION, KS 67127	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JH NAIL RANCH	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  ALBANY, TX 76430	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JINGOLI, JOEY	Amount of Contribution (\$) \$220.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JINGOLI, JOEY	Amount of Contribution (\$) \$420.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JK LOGAN	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  HARBOR SPGS, MI 49740	
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: 105/231 Rpt: 109/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JKL RANCH	<b>7</b> Amount of Contribution (\$) \$108.00
	<b>6</b> Contributor address; City; State; Zip Code  CASTLE ROCK, CO 80104	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JKL RANCH	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  CASTLE ROCK, CO 80104	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHN, GAUGHAN	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  LAS VEGAS, NV 89148	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, CLAY	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  PERRIN, TX 76486	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, G ROSE	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  WADDELL, AZ 85355	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 106/231 Rpt: 110/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, G ROSE ..... <b>6</b> Contributor address; City; State; Zip Code  WADDELL, AZ 85355	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, G ROSE ..... Contributor address; City; State; Zip Code  WADDELL, AZ 85355	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, G ROSE ..... Contributor address; City; State; Zip Code  SCOTTSDALE, AZ 85355	Amount of Contribution (\$) \$280.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, G ROSE ..... Contributor address; City; State; Zip Code  SCOTTSDALE, AZ 85355	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, KATIE BETH ..... Contributor address; City; State; Zip Code  WILLIAMSTON, SC 29697	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 107/231 Rpt: 111/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, KEITH ..... <b>6</b> Contributor address; City; State; Zip Code  CISCO, TX 76437	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, MARY AGNES ..... Contributor address; City; State; Zip Code  FORT WORTH, TX 76110	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, NASH ..... Contributor address; City; State; Zip Code  CLINTON, NC 28329	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, STONEY ..... Contributor address; City; State; Zip Code  JACKSBORO, TX 76458	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSRUD RANCH ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$200.00
	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: 108/231 Rpt: 112/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOLLY, MARK ..... <b>6</b> Contributor address; City; State; Zip Code  FORT LAUDERDALE, FL 33301	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, AMY ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, E T ..... Contributor address; City; State; Zip Code  DALLAS, TX 75209-3404	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JORGENSEN, TRENT ..... Contributor address; City; State; Zip Code  MT. PLEASANT, UT 84647	Amount of Contribution (\$) \$330.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) K BAR K QUARTER HORSES ..... Contributor address; City; State; Zip Code  PURCELL, OK 73080	Amount of Contribution (\$) \$100.00
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: 109/231 Rpt: 113/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAHANEK, PATRICK ..... <b>6</b> Contributor address; City; State; Zip Code  PASADENA, TX 77505	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAPUNIAI, LILIA ..... Contributor address; City; State; Zip Code  HONOLULU, HI 96813	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARHAN, JAMES ..... Contributor address; City; State; Zip Code  BLANCO, TX 78606	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KARHAN, JAMES ..... Contributor address; City; State; Zip Code  BLANCO, TX 78606	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAUER, TOM ..... Contributor address; City; State; Zip Code  WINNER, SD 57580	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 110/231 Rpt: 114/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KAUFMANN (ESTATE), MICHELLE	<b>7</b> Amount of Contribution (\$) \$135.00
	<b>6</b> Contributor address; City; State; Zip Code  GRANBURY, TX 76049	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KECHNIE, BRIAN	Amount of Contribution (\$) \$175.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEEN, BRIAN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  LEANDER, TX 78641	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEENE, HAL HARVEY	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEETH, RAMEY	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  SPRINGTOWN, TX 76082	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 111/231 Rpt: 115/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEETH, RAMEY	<b>7</b> Amount of Contribution (\$) \$200.00
	<b>6</b> Contributor address; City; State; Zip Code  SPRINGTOWN, TX 76082	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLEY, RANDY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  FRANKLIN FURNACE, OH 45629	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLY, JACK	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76086	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEMPKER, MARK	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  EUGENE, MO 65032	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KESSEL CATTLE CO	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  BLUEJACKET, OK 74333	
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: 112/231 Rpt: 116/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 09/11/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KETCHER, KEITH	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  STARK CITY, MO 64866	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KETCHER, KEITH	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  STARK CITY, MO 64866	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KHARRAZI, NAVID	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code  TUCSON, AZ 85743	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, JOSH	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  CISCO, TX 76437	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KING, RICHARD	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  OKLAHOMA CITY, OK 73105	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 113/231 Rpt: 117/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KITCHEN, STEVEN	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  GAINESVILLE, TX 76240-8523	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLOP, BILL	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  AGASSIZ BC V0M1A3 Canada	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KLOP, BILL	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  AGASSIZ BC V0M1A3 Canada	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KNIGHT, KEVIN	Amount of Contribution (\$) \$175.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KT RANCH	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code  ROOSEVELT, UT 84066	
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: 114/231 Rpt: 118/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KT RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  ROOSEVELT, UT 84066	<b>7</b> Amount of Contribution (\$) \$200.00
	<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KT RANCH ..... Contributor address; City; State; Zip Code  ROOSEVELT, UT 84066	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KT RANCH ..... Contributor address; City; State; Zip Code  ROOSEVELT, UT 84066	Amount of Contribution (\$) \$190.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUEHNY, BRENT ..... Contributor address; City; State; Zip Code  ELMORE CITY, OK 73433	Amount of Contribution (\$) \$380.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KUEHNY, BRENT ..... Contributor address; City; State; Zip Code  ELMORE CITY, OK 73433	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 115/231 Rpt: 119/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACKY, CHASE	<b>7</b> Amount of Contribution (\$) \$95.00
	<b>6</b> Contributor address; City; State; Zip Code  BURLINGTON, NC 27215-9219	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACKY, DAVID	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  BURLINGTON, NC 27215	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACKY, JADE	Amount of Contribution (\$) \$115.00
	Contributor address; City; State; Zip Code  BURLINGTON, NC 27215	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACY, BILL	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  CRESTED BUTTE, CO 81224-1145	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LACY, BILL	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  CRESTED BUTTE, CO 81224-1145	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 116/231 Rpt: 120/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAIN, SHAWN ..... <b>6</b> Contributor address; City; State; Zip Code  SPRINGTOWN, TX 76082	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAIN, SHAWN ..... Contributor address; City; State; Zip Code  SPRINGTOWN, TX 76082	Amount of Contribution (\$) \$240.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAKESIDE RANCH ..... Contributor address; City; State; Zip Code  EDMOND, OK 73012	Amount of Contribution (\$) \$80.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAMBERT, CARL ..... Contributor address; City; State; Zip Code  HEMPSTEAD, TX 77445	Amount of Contribution (\$) \$80.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGDON, TONY ..... Contributor address; City; State; Zip Code  AUBREY, TX 76227	Amount of Contribution (\$) \$430.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 117/231 Rpt: 121/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGDON, TONY	<b>7</b> Amount of Contribution (\$) \$150.00
	<b>6</b> Contributor address; City; State; Zip Code  AUBREY, TX 76227	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARRE, DUANE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  ST. WALBURG SK S0M2T0 Canada	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LARRY HALL CUTTING HORSES	Amount of Contribution (\$) \$215.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LATTANZIO, TINA	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code  SAN CLEMENTE, CA 92673	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LATTIMORE, MARY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  SANTA FE, NM 87504-2665	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 118/231 Rpt: 122/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUB, ANDRE	<b>7</b> Amount of Contribution (\$) \$150.00
	<b>6</b> Contributor address; City; State; Zip Code  HOWE, TX 75459	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUBE, KAITLYN	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  CORONA, CA 92883	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUBE, KAITLYN	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  CORONA, CA 92883	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAUBE, KAITLYN	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  CORONA, CA 92883	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAVELLE, JOHN P	Amount of Contribution (\$) \$390.00
	Contributor address; City; State; Zip Code  ATHENS, OH 45701	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 119/231 Rpt: 123/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LABELLE, JOHN P	<b>7</b> Amount of Contribution (\$) \$140.00
	<b>6</b> Contributor address; City; State; Zip Code  ATHENS, OH 45701	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAVENDER, MARK	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  BRENHAM, TX 77834	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAZY 8 RANCHES	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  COLEMAN, TX 76834	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAZY 8 RANCHES	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  COLEMAN, TX 76834	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, CALEB	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  NEVADA, TX 75173	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 120/231 Rpt: 124/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMOND, JOJO ..... <b>6</b> Contributor address; City; State; Zip Code  ANDREWS, TX 79714	<b>7</b> Amount of Contribution (\$) \$200.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEMOND, NEWT ..... Contributor address; City; State; Zip Code  ANDREWS, TX 79714	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LESH, JARED ..... Contributor address; City; State; Zip Code  WHITESBORO, TX 76273	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LESSARD, KATHY ..... Contributor address; City; State; Zip Code  PIEDMONT, MO 63957	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVISAY FARMS ..... Contributor address; City; State; Zip Code  CRESTON, CA 93432	Amount of Contribution (\$) \$120.00
	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: 121/231 Rpt: 125/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEVISAY FARMS ..... <b>6</b> Contributor address; City; State; Zip Code  CRESTON, CA 93432	<b>7</b> Amount of Contribution (\$) \$200.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS, RICKY ..... Contributor address; City; State; Zip Code  BATESVILLE, MS 38606	Amount of Contribution (\$) \$120.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEWIS/MILLER PARTNERSHIP ..... Contributor address; City; State; Zip Code  QUANAH, TX 79252	Amount of Contribution (\$) \$200.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINDSEY, JOHN ..... Contributor address; City; State; Zip Code  OLYMPIA, WA 98502-3328	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINVILLE, TRAVIS ..... Contributor address; City; State; Zip Code  FOX, AR 72051-9452	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 122/231 Rpt: 126/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LIPSEY, RAY	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  LINCOLN NE, NE 68523	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LITTLE, JANICE	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  JOHNSON CITY, TX 78636	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOCKER, DAVID	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  BROOKESMITH, TX 76827-4403	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOGAN, ANN	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  WICHITA, KS 67204	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOGAN, ANN	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  WICHITA, KS 67204	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 123/231 Rpt: 127/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOS JABONCILLOS RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  PREMONT, TX 78375	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOVELACE, TERRY ..... Contributor address; City; State; Zip Code  RAYMOND, MS 39154-8935	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWRANCE, JOHN ..... Contributor address; City; State; Zip Code  WHITT, TX 76490	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOWRANCE, JOHN ..... Contributor address; City; State; Zip Code  WHITT, TX 76490	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUCAS CATTLE COMPANY ..... Contributor address; City; State; Zip Code  CROSS TIMBERS, MO 65634	Amount of Contribution (\$) \$100.00
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: 124/231 Rpt: 128/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUGO, GERMAN	<b>7</b> Amount of Contribution (\$) \$140.00
	<b>6</b> Contributor address; City; State; Zip Code  GAINESVILLE, TX 76240	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUNGWITZ, THERESA	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  SCOTTSDALE, AZ 85255	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYONS, MELISSA	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code  IOLA, TX 77861	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYONS, MELISSA	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  IOLA, TX 77861	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYONS, MELISSA	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  IOLA, TX 77861	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 125/231 Rpt: 129/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LYONS, TOM	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  GRANDVIEW, TX 76050-0298	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MACONE, JEANNIE	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  MILLSAP, TX 76066	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGNESS, MICHAEL	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  ARROYO SECO, NM 87514	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAGNUSON, MARK	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  GARFIELD, AR 72732	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAIN RIVER QUARTER HORSES	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  GAINESVILLE, TX 76240	
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: 126/231 Rpt: 130/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MALING, LORI	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  PHOENIX, AZ 85018	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANCUSO, JANE	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  PLANTERSVILLE, TX 77363	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANCUSO, JOHN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  PLANTERSVILLE, TX 77363	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANCUSO, JOHN	Amount of Contribution (\$) \$260.00
	Contributor address; City; State; Zip Code  PLANTERSVILLE, TX 77363	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANION, TIFFANY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  CODY, WY 82414	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 127/231 Rpt: 131/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANN, CINDY ..... <b>6</b> Contributor address; City; State; Zip Code  CAREY, ID 83320	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MANRESA, ARIELLE ..... Contributor address; City; State; Zip Code  WINTER PARK, FL 32789	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARCELLO, STEVEN ..... Contributor address; City; State; Zip Code  THIBODAUX, LA 70301	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARGOT HAZELL ..... Contributor address; City; State; Zip Code  DENTON, TX 76207	Amount of Contribution (\$) \$280.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARLEY, JIMMY ..... Contributor address; City; State; Zip Code  PLEASANT GARDEN, NC 27313	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 128/231 Rpt: 132/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARMANDE, MARVIN ..... <b>6</b> Contributor address; City; State; Zip Code  THERIOT, LA 70397	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARMANDE, MARVIN ..... Contributor address; City; State; Zip Code  THERIOT, LA 70397	Amount of Contribution (\$) \$230.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARMANDE, MARVIN ..... Contributor address; City; State; Zip Code  THERIOT, LA 70397	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARMANDE, MARVIN ..... Contributor address; City; State; Zip Code  THERIOT, LA 70397	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, GRANT ..... Contributor address; City; State; Zip Code  HENSLEY, AR 72065	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 129/231 Rpt: 133/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, NANCY	<b>7</b> Amount of Contribution (\$) \$75.00
	<b>6</b> Contributor address; City; State; Zip Code  BRENHAM, TX 77833	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, STEVE	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  BRENHAM, TX 77833	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINS, FREDERICO	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  MINERAL WELLS, TX 76067	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINS, NILA	Amount of Contribution (\$) \$175.00
	Contributor address; City; State; Zip Code  CRESSON, TX 76035-4045	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARVIN, SUSAN	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  BARNSDALL, OK 74002	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 130/231 Rpt: 134/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASSAGLIA, MARJORIE .....  <b>6</b> Contributor address; City; State; Zip Code  RAMONA, CA 92065-7407	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MASTERSON, ROBERT .....  Contributor address; City; State; Zip Code  GUTHRIE, TX 79236	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHEWS, GREG .....  Contributor address; City; State; Zip Code  CLARKSVILLE, TN 37043	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATHIS, K P .....  Contributor address; City; State; Zip Code  LUFKIN, TX 75904	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MATT GAINES CUTTING HORSES .....  Contributor address; City; State; Zip Code  WEATHERFORD, TX 76086	Amount of Contribution (\$) \$275.00
	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: 131/231 Rpt: 135/249	
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041	
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, TIM ..... <b>6</b> Contributor address; City; State; Zip Code  SALITLO, MS 38866	<b>7</b> Amount of Contribution (\$)  \$115.00	
	<b>8</b> Principal occupation / Job title (See Instructions) Owner		
<b>9</b> Employer (See Instructions) Owner	<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, TIM ..... <b>Contributor address; City; State; Zip Code</b>  SALITLO, MS 38866	<b>Amount of Contribution (\$)</b>  \$40.00
	<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, TIM ..... <b>Contributor address; City; State; Zip Code</b>  SALITLO, MS 38866	<b>Amount of Contribution (\$)</b>  \$100.00	
	<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, TIM ..... <b>Contributor address; City; State; Zip Code</b>  SALITLO, MS 38866	<b>Amount of Contribution (\$)</b>  \$40.00	
	<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) MAY, TIM ..... <b>Contributor address; City; State; Zip Code</b>  SALITLO, MS 38866	<b>Amount of Contribution (\$)</b>  \$135.00	
	<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 132/231 Rpt: 136/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCBRIDE, JUSTIN	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  WHITESBORO, TX 76273	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLINTOCK, JORDYN	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  SHERMAN, TX 75092	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCLURG, SCOTT	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  LIPAN, TX 76462	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOY, JOHN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  BOWIE, TX 76230	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCOY, JOHN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  BOWIE, TX 76230	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 133/231 Rpt: 137/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCRARY, ERICA	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  AUBREY, TX 76227	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCRAY, B F	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  MANCHESTER, OK 73758	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCRAY, B F	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  MANCHESTER, OK 73758	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCULLAR, CLAY	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  ABILENE, TX 79606	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDANIEL, CLINT	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  MINERAL WELLS, TX 76067	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 134/231 Rpt: 138/249	
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041	
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDAVID, DAVID .....  <b>6</b> Contributor address; City; State; Zip Code  FORT WORTH, TX 76107	<b>7</b> Amount of Contribution (\$)  \$400.00	
	<b>8</b> Principal occupation / Job title (See Instructions) Owner		
<b>9</b> Employer (See Instructions) Owner	<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDAVID, DAVID .....  <b>Contributor address; City; State; Zip Code</b>  FORT WORTH, TX 76107	<b>Amount of Contribution (\$)</b>  \$40.00
	<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) MCDAVID, DAVID .....  <b>Contributor address; City; State; Zip Code</b>  FORT WORTH, TX 76107	<b>Amount of Contribution (\$)</b>  \$500.00	
	<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) MCEWEN, ALAN .....  <b>Contributor address; City; State; Zip Code</b>  NORTH PORT, FL 34291-5689	<b>Amount of Contribution (\$)</b>  \$100.00	
	<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGAHEY, KAGE .....  <b>Contributor address; City; State; Zip Code</b>  WEATHERFORD, TX 76085	<b>Amount of Contribution (\$)</b>  \$100.00	
	<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 135/231 Rpt: 139/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGEE, JUNE H ROBERTS .....  <b>6</b> Contributor address; City; State; Zip Code  GRANBURY, TX 76049-2640	<b>7</b> Amount of Contribution (\$) \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGLOTHLIN, BRETT .....  Contributor address; City; State; Zip Code  PERRIN, TX 76486	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRAW, HELEN KINDLE .....  Contributor address; City; State; Zip Code  DALLAS, TX 75248-7901	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRAW, JOHN .....  Contributor address; City; State; Zip Code  MARSHALL, MO 65340	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGRAW, JOHN .....  Contributor address; City; State; Zip Code  MARSHALL, MO 65340	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 136/231 Rpt: 140/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCWILLIAMS, BRITTINEE	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  DIBOLL, TX 75941	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEAGHER, NICK	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  ANTONITA, CO 81120	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEEKS, JACOB	Amount of Contribution (\$) \$220.00
	Contributor address; City; State; Zip Code  SHELBYVILLE, KY 40065	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MELSHAW, VICTORIA	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  HEALDSBURG, CA 95448	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESALAM, RANDY	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code  Aledo, TX 76008	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 137/231 Rpt: 141/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESALAM, RANDY	<b>7</b> Amount of Contribution (\$) \$200.00
	<b>6</b> Contributor address; City; State; Zip Code  Aledo, TX 76008	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESALAM, SABRINA	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  VERSAILLES, KY 40383	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MESSENGER, CADE HANSMA	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIDKIFF, KAYCE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  MILANO, TX 76556	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MIKE AND KRISTY HITTI (PARTNERSHIP)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  IGNACIO, CO 81137	
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: 138/231 Rpt: 142/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, MATT ..... <b>6</b> Contributor address; City; State; Zip Code  POOLVILLE, TX 76487	<b>7</b> Amount of Contribution (\$) \$75.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, MEGAN ..... Contributor address; City; State; Zip Code  POOLVILLE, TX 76487	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, RICHARD ..... Contributor address; City; State; Zip Code  GEARY, OK 73040	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, RICK ..... Contributor address; City; State; Zip Code  SPOKANE, MO 65754	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLS, CLIFF ..... Contributor address; City; State; Zip Code  RAYVILLE, LA 71269	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 139/231 Rpt: 143/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MINSHALL FARMS ..... <b>6</b> Contributor address; City; State; Zip Code  GEORGETOWN ON L7G5G8 Canada	<b>7</b> Amount of Contribution (\$) \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, JAMES BRADLEY ..... Contributor address; City; State; Zip Code  PEASTER, TX 76485	\$250.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, JAMES BRADLEY ..... Contributor address; City; State; Zip Code  WILLS POINT, TX 75169	\$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, KACI ..... Contributor address; City; State; Zip Code  MILLER, MO 65707	\$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MITCHELL, KACI ..... Contributor address; City; State; Zip Code  MILLER, MO 65707	\$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 140/231 Rpt: 144/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOHL, SHARI	<b>7</b> Amount of Contribution (\$) \$95.00
	<b>6</b> Contributor address; City; State; Zip Code  SULPHUR SPGS, TX 75482-6606	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONCKTON, TOM	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  SCOTTSDALE, AZ 85262	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, BEVERLY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  RICHMOND, TX 77406	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, JEAN	Amount of Contribution (\$) \$240.00
	Contributor address; City; State; Zip Code  SCOTTSDALE, AZ 85255	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOORE, JENCEE	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  HULBERT, OK 74441	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 141/231 Rpt: 145/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORAIS, KRISTIN ..... <b>6</b> Contributor address; City; State; Zip Code  WHITESBORO, TX 76273	<b>7</b> Amount of Contribution (\$) \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORINE, SARAH ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORINE, SARAH ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORINE, SARAH ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORINE, SARAH ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 142/231 Rpt: 146/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, DAN ..... <b>6</b> Contributor address; City; State; Zip Code  HUTTO, TX 78634	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LANCE ..... Contributor address; City; State; Zip Code  AUSTIN, TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, LENN ..... Contributor address; City; State; Zip Code  GUNTERSVILLE, AL 35976	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOWERY, MICHELLE ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, KARA ..... Contributor address; City; State; Zip Code  PALO PINTO, TX 76484	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 143/231 Rpt: 147/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURPHY, ROBIN	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  BETHEL, OH 45106	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, KAREN	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  BUCYRUS, KS 66013	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, KAREN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  BUCYRUS, KS 66013	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURRAY, KAREN	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  BUCYRUS, KS 66013	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, JACLYN	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  RAYNE, LA 70567	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 144/231 Rpt: 148/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, PAUL ..... <b>6</b> Contributor address; City; State; Zip Code  RAYNE, LA 70578	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MYERS, PAUL ..... Contributor address; City; State; Zip Code  RAYNE, LA 70578	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NANCY AND STEVE MARTIN ..... Contributor address; City; State; Zip Code  BRENHAM, TX 77833	Amount of Contribution (\$) \$290.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEAL, RICHARD ..... Contributor address; City; State; Zip Code  NACOGDOCHES, TX 75964	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEAL, SANDRA ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 145/231 Rpt: 149/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEELY, BEN ..... <b>6</b> Contributor address; City; State; Zip Code  LYONS, GA 30436-0626	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEFF, BRETT ..... Contributor address; City; State; Zip Code  SPANISHFORK, UT 84660	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NELSON, JUSTIN ..... Contributor address; City; State; Zip Code  SHEPHERD, TX 77371	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEPHRITE HOLDINGS CO ..... Contributor address; City; State; Zip Code  LANGLEY BC V2Z1R3 Canada	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESHEM, JIM ..... Contributor address; City; State; Zip Code  DES LACS, ND 58733	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 146/231 Rpt: 150/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEWMAN, KRISTIN ..... <b>6</b> Contributor address; City; State; Zip Code  CAVE CREEK, AZ 85331	<b>7</b> Amount of Contribution (\$)  \$140.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOBLE, ARTHUR ..... Contributor address; City; State; Zip Code  MADISON, MS 39110-6838	Amount of Contribution (\$)  \$140.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOBLE, DON ..... Contributor address; City; State; Zip Code  MILTON-FRWTR, OR 97862	Amount of Contribution (\$)  \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOLAN, RICKY LYNN ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$)  \$40.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORRIS, KAYLA ..... Contributor address; City; State; Zip Code  SUMRALL, MS 39482	Amount of Contribution (\$)  \$40.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 147/231 Rpt: 151/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORRIS, STEVEN ..... <b>6</b> Contributor address; City; State; Zip Code  COLORADO SPGS, CO 80907-9019	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NORRIS, STEVEN ..... Contributor address; City; State; Zip Code  COLORADO SPGS, CO 80907-9019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NUTTALL, BRET ..... Contributor address; City; State; Zip Code  GAINESVILLE, TX 76240	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NUTTALL, BRET ..... Contributor address; City; State; Zip Code  GAINESVILLE, TX 76240	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OBERRAUCH, BRITTA ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 148/231 Rpt: 152/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OCR INVESTMENTS ..... <b>6</b> Contributor address; City; State; Zip Code  SARATOGA, WY 82331	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OCR INVESTMENTS ..... Contributor address; City; State; Zip Code  SARASOTA, WY 82331	Amount of Contribution (\$) \$340.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OGDEN, JEFFRY ..... Contributor address; City; State; Zip Code  KOUNTZE, TX 77625	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OLSEN, STEVE ..... Contributor address; City; State; Zip Code  BOYD, TX 76023	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONE OAK RANCH ..... Contributor address; City; State; Zip Code  ROCKWALL, TX 75032	Amount of Contribution (\$) \$100.00
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: 149/231 Rpt: 153/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OPHIR CREEK STABLES ..... <b>6</b> Contributor address; City; State; Zip Code  WASHOE VALLEY, NV 89704	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORNELAS, PEDRO ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	\$94.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORNELAS, PEDRO ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	\$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OVERSTREET, PAULA ..... Contributor address; City; State; Zip Code  MILSAP, TX 76066	\$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OXBOW RANCH ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	\$100.00
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: 150/231 Rpt: 154/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OXBOW RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	<b>7</b> Amount of Contribution (\$) \$200.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACE, COLLIN ..... Contributor address; City; State; Zip Code  GENOLA, UT 84655	Amount of Contribution (\$) \$140.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PACE, DANIELLE ..... Contributor address; City; State; Zip Code  PROVO, UT 84601-3748	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PADGETT, TERESA ..... Contributor address; City; State; Zip Code  GAINESVILLE, TX 76240	Amount of Contribution (\$) \$75.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PADGETT, TERESA ..... Contributor address; City; State; Zip Code  GAINESVILLE, TX 76240	Amount of Contribution (\$) \$75.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 151/231 Rpt: 155/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAINTED VALLEY RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAINTED VALLEY RANCH ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANNELL, VICK ..... Contributor address; City; State; Zip Code  OXFORD, AR 38655	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARA, ELIZABETH ..... Contributor address; City; State; Zip Code  OTHELLO, WA 99344	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, BILLY ..... Contributor address; City; State; Zip Code  HARTFORD, AL 36344	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 152/231 Rpt: 156/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, JILIAN ..... <b>6</b> Contributor address; City; State; Zip Code  ROCKWALL, TX 75032	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, WILL ..... Contributor address; City; State; Zip Code  DOOTHAN, AL 36303	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARR, NORMAN ..... Contributor address; City; State; Zip Code  LIHUE, HI 96766	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARSONS, DARRELL ..... Contributor address; City; State; Zip Code  MANDAN, ND 58554	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARSONS, ROBERT ..... Contributor address; City; State; Zip Code  CONGERVILLE, IL 61729	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 153/231 Rpt: 157/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: PAT AND CINDY HICKS PARTNERSHIP .....  <b>6</b> Contributor address; City; State; Zip Code  MURRAY, KY 42071	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: PATTESON, CHRIS .....  Contributor address; City; State; Zip Code  MIDLAND, TX 79705	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: PATTILLO CUTTING HORSES .....  Contributor address; City; State; Zip Code  ST ELMO, IL 62458	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: PATTON, SANDRA HALLIDAY .....  Contributor address; City; State; Zip Code  WASHINGTON CH, OH 43160-0716	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: PATTON, SANDRA HALLIDAY .....  Contributor address; City; State; Zip Code  WASHINGTON CH, OH 43160-0716	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 154/231 Rpt: 158/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAXTON, BILL ..... <b>6</b> Contributor address; City; State; Zip Code  TALLULAH, LA 71284-0965	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, JAMES ..... Contributor address; City; State; Zip Code  OVERBROOK, OK 73453	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, JAMES ..... Contributor address; City; State; Zip Code  OVERBROOK, OK 73453	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAYNE, JAMES ..... Contributor address; City; State; Zip Code  OVERBROOK, OK 73453	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEARSON, MARK ..... Contributor address; City; State; Zip Code  SPEARMAN, TX 79081-0766	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 155/231 Rpt: 159/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PEARSON, MARK	<b>7</b> Amount of Contribution (\$) \$75.00
	<b>6</b> Contributor address; City; State; Zip Code  SPEARMAN, TX 79081-0766	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERDUE, DANNY	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  RED OAK, TX 75154	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKS, LACHLAN	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERKS, LACHLAN	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERROTTI, MIA	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  FORT LUPTON, CO 80621	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 156/231 Rpt: 160/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PERRY, CHRISTINE	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  CALVERT, TX 77837	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, AVA	Amount of Contribution (\$) \$110.00
	Contributor address; City; State; Zip Code  PALOS VERDES ESTATES, CA 90274	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, KATIE COSTELLO	Amount of Contribution (\$) \$375.00
	Contributor address; City; State; Zip Code  SCOTTSDALE, AZ 85262	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, KATIE COSTELLO	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  SCOTTSDALE, AZ 85262	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, SHERYL	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  REDMOND, OR 97756	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 157/231 Rpt: 161/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PETERSON, SHERYL	<b>7</b> Amount of Contribution (\$) \$200.00
	<b>6</b> Contributor address; City; State; Zip Code  SEATTLE, WA 98101	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, PAIGE	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  DANDRIDGE, TN 37725	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHINNEY, JUSTIN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  DELEON, TX 76444	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PIERCE, JESSICA	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  CANTON, MS 39046	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINE, REBECCA	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 158/231 Rpt: 162/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINWHEEL PARTNERS ..... <b>6</b> Contributor address; City; State; Zip Code  TEMPLETON, CA 93465	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PINWHEEL PARTNERS ..... Contributor address; City; State; Zip Code  TEMPLETON, CA 93465	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PITTMAN, BILL JACK ..... Contributor address; City; State; Zip Code  MORSE, TX 79062	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLATINUM HORSE SALES ..... Contributor address; City; State; Zip Code  BURLESON, TX 76028	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLATT, KENNETH ..... Contributor address; City; State; Zip Code  FORT LUPTON, CO 80621	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 159/231 Rpt: 163/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLENDL, RICK .....  KINGSLEY, IA 51028-8608	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PLENDL, RICK .....  KINGSLEY, IA 51028-8608	Amount of Contribution (\$) \$155.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POOLE, DANNY .....  TEXLINE, TX 79087-0010	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) POUNDS, JESSICA .....  LIPAN, TX 76462	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRELLWITZ, MARTY .....  POOLVILLE, TX 76487	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 160/231 Rpt: 164/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRETTY HILL PASTORAL ..... <b>6</b> Contributor address; City; State; Zip Code  KANGEROO GROUND VI 03097 Australia	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PRITCHETT, DOUGLAS ..... Contributor address; City; State; Zip Code  QUINLAN, TX 75474	\$160.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PUMFORD, JEAN ..... Contributor address; City; State; Zip Code  MARLOW, OK 73055	\$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURSELLEY, JIMMY DON ..... Contributor address; City; State; Zip Code  BURLESON, TX 76028	\$135.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURSELLEY, JIMMY DON ..... Contributor address; City; State; Zip Code  BURLESON, TX 76028	\$175.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 161/231 Rpt: 165/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURSELLEY, JOHNNY ..... <b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088-1809	<b>7</b> Amount of Contribution (\$) \$75.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAFTER FOUR LAND AND CATTLE CO ..... Contributor address; City; State; Zip Code  HOLLAND, MI 49423	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAFTER FOUR LAND AND CATTLE CO ..... Contributor address; City; State; Zip Code  HOLLAND, MI 49423	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSEY, BARNWELL ..... Contributor address; City; State; Zip Code  HUNTERSVILLE, NC 28078	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSEY, BARNWELL ..... Contributor address; City; State; Zip Code  HUNTERSVILLE, NC 28078	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 162/231 Rpt: 166/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSEY, BARNWELL ..... <b>6</b> Contributor address; City; State; Zip Code  HUNTERSVILLE, NC 28078	<b>7</b> Amount of Contribution (\$) \$120.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAMSEY, BARNWELL ..... Contributor address; City; State; Zip Code  HUNTERSVILLE, NC 28078	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RANGEL, CARLOS ..... Contributor address; City; State; Zip Code  DAVIE, FL 33324	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAPP, PHILIP ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$350.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAPP, PHILIP ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$300.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 163/231 Rpt: 167/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAPP, PHILIP	<b>7</b> Amount of Contribution (\$) \$800.00
	<b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RATHBUN, DAKOTA	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code  PILOT POINT, CO 76258	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAVA, JERRY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  PASO ROBLES, CA 93447-2160	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAWITSER, MIKE	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  PASO ROBLES, CA 93446	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY SHELL RANCH	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  FORT WORTH, TX 76107	
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: 164/231 Rpt: 168/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REATA CUTTING HORSES .....  <b>6</b> Contributor address; City; State; Zip Code  FORT WORTH, TX 76107	<b>7</b> Amount of Contribution (\$)  \$215.00
	<b>8</b> Principal occupation / Job title (See Instructions)  Owner	<b>9</b> Employer (See Instructions)  Employer (See Instructions) Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) RECTOR, JENNIFER .....  <b>Contributor address; City; State; Zip Code</b>  ROGERSVILLE, MO 65742	<b>Amount of Contribution (\$)</b>  \$270.00
	<b>Principal occupation / Job title (See Instructions)</b>  Owner	<b>Employer (See Instructions)</b>  Employer (See Instructions) Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) REDTOWN'S N5 LAND & LIVESTOCK .....  <b>Contributor address; City; State; Zip Code</b>  POLLOK, TX 75969-2429	<b>Amount of Contribution (\$)</b>  \$240.00
	<b>Principal occupation / Job title (See Instructions)</b>  Employer (See Instructions)	<b>Employer (See Instructions)</b>  Employer (See Instructions)
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) REDTOWN'S N5 LAND & LIVESTOCK .....  <b>Contributor address; City; State; Zip Code</b>  POLLOK, TX 75969-2429	<b>Amount of Contribution (\$)</b>  \$180.00
	<b>Principal occupation / Job title (See Instructions)</b>  Employer (See Instructions)	<b>Employer (See Instructions)</b>  Employer (See Instructions)
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) REDTOWN'S N5 LAND & LIVESTOCK .....  <b>Contributor address; City; State; Zip Code</b>  POLLOK, TX 75969-2429	<b>Amount of Contribution (\$)</b>  \$100.00
	<b>Principal occupation / Job title (See Instructions)</b>  Employer (See Instructions)	<b>Employer (See Instructions)</b>  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: 165/231 Rpt: 169/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, JR, MAX ..... <b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, JR, MAX ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REED, MAX ..... Contributor address; City; State; Zip Code  OZAN, AR 71855	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REEVES, RONALD ..... Contributor address; City; State; Zip Code  DOW, IL 62022	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REICHART, GARY ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$80.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 166/231 Rpt: 170/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REICHART, GARY	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  FRANKTON, IN 46044	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REICHART, GARY	Amount of Contribution (\$) \$390.00
	Contributor address; City; State; Zip Code  FRANKTON, IN 46044	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REICHART, MICHELLE	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REICHART, MICHELLE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  FRANKTON, IN 46044	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REID, SANDY	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  LEDUC COUNTY AB T4X0Y6 Canada	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 167/231 Rpt: 171/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REID, SANDY ..... <b>6</b> Contributor address; City; State; Zip Code  LEDUC COUNTY AB T4X0Y6 Canada	<b>7</b> Amount of Contribution (\$) \$175.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REILLY, KATHERINE ..... Contributor address; City; State; Zip Code  SPRINGTOWN, TX 76082	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REIMEL CREEK RANCH ..... Contributor address; City; State; Zip Code  CAVE CREEK, AZ 85331	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REISINGER, TANYA ..... Contributor address; City; State; Zip Code  BRENTWOOD, CA 94613	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REMPEL, TRAVIS ..... Contributor address; City; State; Zip Code  ABBOTSFORD BC V3G1T7 Canada	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 168/231 Rpt: 172/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RETTERATH, JUSTIN ..... <b>6</b> Contributor address; City; State; Zip Code  WASHBURN, ND 58577	<b>7</b> Amount of Contribution (\$) \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RETTERATH, JUSTIN ..... Contributor address; City; State; Zip Code  WASHBURN, ND 58577	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RHOADES, JOSH ..... Contributor address; City; State; Zip Code  BOWIE, TX 76230	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, SCOTTY ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087-8165	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, SCOTTY ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087-8165	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 169/231 Rpt: 173/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICE, TARIN	<b>7</b> Amount of Contribution (\$) \$275.00
	<b>6</b> Contributor address; City; State; Zip Code  POOLVILLE, TX 76487	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIDDELS, GARRETT	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code  SHERMAN, TX 75092	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RIO ROCA LAND & CATTLE CO	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  GRAFORD, TX 76449	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RK SCHULTZ HORSES	Amount of Contribution (\$) \$630.00
	Contributor address; City; State; Zip Code  SACRAMENTO, CA 95818	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, MATTHEW	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  DALLAS, TX 75201	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 170/231 Rpt: 174/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBINSON, MATTHEW	<b>7</b> Amount of Contribution (\$) \$140.00
	<b>6</b> Contributor address; City; State; Zip Code  DALLAS, TX 75201	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCIADA CATTLE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  ROCIADA, NM 87742	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCK CREEK CUTTING HORSES	Amount of Contribution (\$) \$270.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCK CREEK CUTTING HORSES	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCK CREEK RANCH	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  GAINESVILLE, TX 76240	
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: 171/231 Rpt: 175/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCK'N DIAMOND EQUINE ..... <b>6</b> Contributor address; City; State; Zip Code  HORSESHOE BAY, TX 78657	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKEN H CUTTING HORSES ..... Contributor address; City; State; Zip Code  COTTONWOOD HEIGHTS, UT 84121-5323	Amount of Contribution (\$) \$390.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKEY, JUSTIN ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKEY, JUSTIN ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKEY, JUSTIN ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$525.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 172/231 Rpt: 176/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKIN R RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  ORANGE, CA 92869	<b>7</b> Amount of Contribution (\$) \$200.00
	<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKIN' WST CATTLE ..... Contributor address; City; State; Zip Code  DALLAS, TX 75218	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKING P RANCH ..... Contributor address; City; State; Zip Code  FORT WORTH, TX 76107	Amount of Contribution (\$) \$400.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKING P RANCH ..... Contributor address; City; State; Zip Code  FORT WORTH, TX 76107	Amount of Contribution (\$) \$385.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKING V HORSES ..... Contributor address; City; State; Zip Code  ALGONQUIN, IL 60102	Amount of Contribution (\$) \$140.00
	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: 173/231 Rpt: 177/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROCKING W RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  CHAPPELL HILL, TX 77426	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODGERS, MCCULLER ..... Contributor address; City; State; Zip Code  WILLISTON, SC 29853	\$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODIGER, KAI ..... Contributor address; City; State; Zip Code  ORANIENBURG BB 16515 Denmark	\$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, REINALDO ..... Contributor address; City; State; Zip Code  KEY BISCAYNE, FL 33149	\$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS HEAVEN SENT RANCH ..... Contributor address; City; State; Zip Code  TUCSON, AZ 85749	\$200.00
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: 174/231 Rpt: 178/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS HEAVEN SENT RANCH .....  <b>6</b> Contributor address; City; State; Zip Code  TUCSON, AZ 85749	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, BRAD .....  Contributor address; City; State; Zip Code  MADILL, OK 73446-9747	\$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, BRAD .....  Contributor address; City; State; Zip Code  MADILL, OK 73446-9747	\$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, JONATHAN .....  Contributor address; City; State; Zip Code  ROCKDALE, TX 76567	\$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROGERS, JUDY .....  Contributor address; City; State; Zip Code  MILLSAP, TX 76066	\$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 175/231 Rpt: 179/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROHLEDER, JAMES ..... <b>6</b> Contributor address; City; State; Zip Code  HAYS, KS 67601	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROJAS, PEDRO ..... Contributor address; City; State; Zip Code  MARIETTA, OK 73448	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RORISON, PATRICK ..... Contributor address; City; State; Zip Code  DAWSON CREEK BC V1G4H4 Canada	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSALES, PETE ..... Contributor address; City; State; Zip Code  CEDAR HILL, TX 75104	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE VALLEY RANCH ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$100.00
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: 176/231 Rpt: 180/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE VALLEY RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSE VALLEY RANCH ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, KELLY ..... Contributor address; City; State; Zip Code  HOT SPRINGS, AR 71903	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROTHWELL, RICHARD ..... Contributor address; City; State; Zip Code  ABILENE, TX 79606-4385	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROUSEY, CORRIE ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 177/231 Rpt: 181/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROUSEY, CORRIE	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUIZ, MARIAN	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  DEVINE, TX 78016	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, DANA	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code  MORGAN, UT 84050	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, DANA	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  MORGAN, UT 84050	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, JAMES	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  FORT WORTH, TX 76132	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 178/231 Rpt: 182/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSSELL, JAMES	<b>7</b> Amount of Contribution (\$) \$80.00
	<b>6</b> Contributor address; City; State; Zip Code  FORT WORTH, TX 76132	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUSTAD, ARLYN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  WALTERS, MN 56097	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RUTHERFORD, TERI LYNNE	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  BRENHAM, TX 77833	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN FLAT CATTLE COMPANY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  MARFA, TX 79843	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN FLAT CATTLE COMPANY	Amount of Contribution (\$) \$420.00
	Contributor address; City; State; Zip Code  MARFA, TX 79843	
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: 179/231 Rpt: 183/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RYAN, JACOB	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  ENNIS, TX 75119	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SADDLE CREEK RANCH	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  BROWNSBORO, TX 75756	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SADLERS FARM	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code  LAKEVIEW, AR 72642	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALON, LAUREN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  QUEEN CREEK, AZ 85142	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALON, LAUREN	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  QUEEN CREEK, AZ 85142	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 180/231 Rpt: 184/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALON, LAUREN ..... <b>6</b> Contributor address; City; State; Zip Code  QUEEN CREEK, AZ 85142	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SALON, LAUREN ..... Contributor address; City; State; Zip Code  QUEEN CREEK, AZ 85142	Amount of Contribution (\$) \$250.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDERO RANCH ..... Contributor address; City; State; Zip Code  LAC LA BICHE AB T0A2C0 Canada	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SANDFORD, JULIE ..... Contributor address; City; State; Zip Code  ORANGE, CA 92869	Amount of Contribution (\$) \$215.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARCO CREEK RANCH ..... Contributor address; City; State; Zip Code  VICTORIA, TX 77902-0409	Amount of Contribution (\$) \$20.00
	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: 181/231 Rpt: 185/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SARCO CREEK RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  VICTORIA, TX 77902-0409	<b>7</b> Amount of Contribution (\$) \$120.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHILLER, CHRIS ..... Contributor address; City; State; Zip Code  STILLWATER, OK 74075	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHILLER, CHRIS ..... Contributor address; City; State; Zip Code  STILLWATER, OK 74075-8674	Amount of Contribution (\$) \$120.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHMOYER, ERIC ..... Contributor address; City; State; Zip Code  MINERAL WELLS, TX 76067	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHRODER, LAURIE ..... Contributor address; City; State; Zip Code  CAMPO, CO 81029	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 182/231 Rpt: 186/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCHULTZ, KEN	<b>7</b> Amount of Contribution (\$) \$430.00
	<b>6</b> Contributor address; City; State; Zip Code  SACRAMENTO, CA 95818	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT EQUINE	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  GAINESVILLE, TX 76240	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCOTT, JAMES	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  BEAUMONT, TX 77705	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCRIBNER, KRISTY	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  GOODRICH, MI 48438	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SDP BUFFALO RANCH	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  FORT WORTH, TX 76126	
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: 183/231 Rpt: 187/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SDP BUFFALO RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  FORT WORTH, TX 76126	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SDP BUFFALO RANCH ..... Contributor address; City; State; Zip Code  FORT WORTH, TX 76126	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SECREST, DOUG ..... Contributor address; City; State; Zip Code  FORT LAUDERDALE, FL 33316	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEIDLER, SHEEL ..... Contributor address; City; State; Zip Code  BEE CAVE, TX 78738	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENN, MARK ..... Contributor address; City; State; Zip Code  AUGUSTA, GA 30909	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 184/231 Rpt: 188/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SENN, MARK	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  AUGUSTA, GA 30909	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHANNONS CUTTING HORSES	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, ROBERT	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  CLEBURN, TX 76033	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, SCOTT	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  MOUNT VERNON, IL 62864	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEEHAN, REBECCA	Amount of Contribution (\$) \$375.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76086	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 185/231 Rpt: 189/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEEHAN, REBECCA ..... <b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76086	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEHADY, TRACI ..... Contributor address; City; State; Zip Code  PALO PINTO, TX 76484	Amount of Contribution (\$) \$230.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEHADY, TRACI ..... Contributor address; City; State; Zip Code  PALO PINTO, TX 76484	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPARD, AUSTIN ..... Contributor address; City; State; Zip Code  SUMMERDALE, AL 36580-0429	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPARD, AUSTIN ..... Contributor address; City; State; Zip Code  SUMMERDALE, AL 36580-0429	Amount of Contribution (\$) \$350.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 186/231 Rpt: 190/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPARD, CADE ..... <b>6</b> Contributor address; City; State; Zip Code  SUMMERDALE, AL 36580-3519	<b>7</b> Amount of Contribution (\$) \$75.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHEPARD, PAMELA ..... Contributor address; City; State; Zip Code  VERBENA, AL 36091	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHERMAN, SARAH ..... Contributor address; City; State; Zip Code  YELM, WA 98597-2113	Amount of Contribution (\$) \$195.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIPPY, TUCKER ..... Contributor address; City; State; Zip Code  DEETH, NV 89823	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHOPPA, KRISTIN ..... Contributor address; City; State; Zip Code  DECATUR, TX 76234	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 187/231 Rpt: 191/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHRAUNER, REID ..... <b>6</b> Contributor address; City; State; Zip Code  ELKHART, KS 67950	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHRIVER, DEBRA ..... Contributor address; City; State; Zip Code  SPICER, MN 56288	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIGALA, JOSE IGNACIO ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIGALA, JOSE IGNACIO ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIGALA, JOSE IGNACIO ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 188/231 Rpt: 192/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIGALA, JOSE IGNACIO	<b>7</b> Amount of Contribution (\$) \$180.00
	<b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMONS, ADAM	Amount of Contribution (\$) \$180.00
	Contributor address; City; State; Zip Code  KILLEN, AL 35645	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMMONS, ADAM	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  KILLEN, AL 35645	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMONE, NICOLA	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  S STEFANO CB 086100 Italy	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMPSON, MARK TIMOTHY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  DRY RIDGE, KY 41035	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 189/231 Rpt: 193/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SIMPSON, MARK TIMOTHY	<b>7</b> Amount of Contribution (\$) \$115.00
	<b>6</b> Contributor address; City; State; Zip Code  DRY RIDGE, KY 41035	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINGLETON RANCHES	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  LAMY, NM 87540-9209	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SINOR, WESLEY	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code  HOUSTON, TX 77027	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SKINKIS, SCOTT	Amount of Contribution (\$) \$240.00
	Contributor address; City; State; Zip Code  BRILLION, WI 54110	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLATE RIVER RANCH	Amount of Contribution (\$) \$850.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	
Principal occupation / Job title (See Instructions) Owner		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: 190/231 Rpt: 194/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLATE RIVER RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	<b>7</b> Amount of Contribution (\$) \$2,025.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLATTEN, J D ..... Contributor address; City; State; Zip Code  FORT WORTH, TX 76179-4224	Amount of Contribution (\$) \$60.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMALLEY, HEATHER ..... Contributor address; City; State; Zip Code  RICHMOND, CA 94805	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMALLEY, HEATHER ..... Contributor address; City; State; Zip Code  RICHMOND, CA 94805	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMART, RUSTY ..... Contributor address; City; State; Zip Code  HEMPSTEAD, TX 77445-8888	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 191/231 Rpt: 195/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMF CUTTING HORSES ..... <b>6</b> Contributor address; City; State; Zip Code  ASPEN, CO 81612	<b>7</b> Amount of Contribution (\$) \$625.00
	<b>8</b> Principal occupation / Job title (See Instructions) <b>9</b> Employer (See Instructions)	
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) SMF CUTTING HORSES ..... <b>Contributor address; City; State; Zip Code</b>  ASPEN, CO 81612	<b>Amount of Contribution (\$)</b> \$150.00
	<b>Principal occupation / Job title (See Instructions)</b> <b>Employer (See Instructions)</b>	
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) SMF CUTTING HORSES ..... <b>Contributor address; City; State; Zip Code</b>  ASPEN, CO 81612	<b>Amount of Contribution (\$)</b> \$200.00
	<b>Principal occupation / Job title (See Instructions)</b> <b>Employer (See Instructions)</b>	
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) SMF CUTTING HORSES ..... <b>Contributor address; City; State; Zip Code</b>  ASPEN, CO 81612	<b>Amount of Contribution (\$)</b> \$350.00
	<b>Principal occupation / Job title (See Instructions)</b> <b>Employer (See Instructions)</b>	
<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DAVID BRANDON ..... <b>Contributor address; City; State; Zip Code</b>  PLEASANTON, TX 78064	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Principal occupation / Job title (See Instructions)</b> <b>Employer (See Instructions)</b> Owner Owner	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 192/231 Rpt: 196/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, DAVID BRANDON	<b>7</b> Amount of Contribution (\$) \$95.00
	<b>6</b> Contributor address; City; State; Zip Code  PLEASANTON, TX 78064	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, GREG	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  MINERAL WELLS, TX 76068-1185	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JIMMIE MILLER	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  GEARY, OK 73040	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JIMMIE MILLER	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  GEARY, OK 73040	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, JIMMIE MILLER	Amount of Contribution (\$) \$640.00
	Contributor address; City; State; Zip Code  GEARY, OK 73040	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 193/231 Rpt: 197/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PAUL K ..... <b>6</b> Contributor address; City; State; Zip Code  MIDLAND, TX 79702	<b>7</b> Amount of Contribution (\$) \$340.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PAUL K ..... Contributor address; City; State; Zip Code  MIDLAND, TX 79702	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PAUL K ..... Contributor address; City; State; Zip Code  MIDLAND, TX 79702	Amount of Contribution (\$) \$480.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, TONY ..... Contributor address; City; State; Zip Code  YORK, SC 29745	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, TONY ..... Contributor address; City; State; Zip Code  YORK, SC 29745	Amount of Contribution (\$) \$260.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 194/231 Rpt: 198/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, TONY ..... <b>6</b> Contributor address; City; State; Zip Code  YORK, SC 29745	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITHERMAN, STACY ..... Contributor address; City; State; Zip Code  CENTERVILLE, TX 75833	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITHERMAN, STACY ..... Contributor address; City; State; Zip Code  CENTERVILLE, TX 75833	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SNYDER, CINDY ..... Contributor address; City; State; Zip Code  ELM GROVE, LA 71051	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOKOL, JAMIE ..... Contributor address; City; State; Zip Code  DELEON SPRINGS, FL 32130	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 195/231 Rpt: 199/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLBERG, MIKAYLA ..... <b>6</b> Contributor address; City; State; Zip Code  GRANDVIEW, TX 76050	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOLO SELECT HORSES ..... Contributor address; City; State; Zip Code  WHITESBORO, TX 76273	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SORRELL, LARRY ..... Contributor address; City; State; Zip Code  ATHENS, TX 75751	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SOUTHWORTH, ROBERT ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER, TONI CARTER ..... Contributor address; City; State; Zip Code  BEAUMONT, TX 77705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 196/231 Rpt: 200/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPENCER, TONI CARTER	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  BEAUMONT, TX 77705	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPIKES, NEWLEY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  ALEDO, TX 76008	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPITZ, KYLE	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  LAMAR, CO 81052-9573	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRIGGS, JIMMY	Amount of Contribution (\$) \$95.00
	Contributor address; City; State; Zip Code  CROSSVILLE, TN 38571	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPRIGGS, JIMMY	Amount of Contribution (\$) \$215.00
	Contributor address; City; State; Zip Code  CROSSVILLE, TN 38571	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 197/231 Rpt: 201/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ST CATTLE COMPANY ..... <b>6</b> Contributor address; City; State; Zip Code  MARIETTA, OK 73448	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAHNKE, SLOAN ..... Contributor address; City; State; Zip Code  SPICER, MN 56288	\$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANDISH, AMANDA ..... Contributor address; City; State; Zip Code  BATON ROUGE, LA 70808	\$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANDISH, AMANDA ..... Contributor address; City; State; Zip Code  BATON ROUGE, LA 70808	\$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANDISH, AMANDA ..... Contributor address; City; State; Zip Code  BATON ROUGE, LA 70808	\$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 198/231 Rpt: 202/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANFORD RANCH PERFORMANCE HORSES .....  <b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	<b>7</b> Amount of Contribution (\$) \$130.00
	<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANFORD RANCH PERFORMANCE HORSES .....  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$320.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANFORD RANCH PERFORMANCE HORSES .....  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STANTON PKARD HORSES .....  HOUSTON, TX 77063	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAR C LAND & CATTLE CO .....  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$380.00
	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: 199/231 Rpt: 203/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAR C LAND & CATTLE CO .....  <b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	<b>7</b> Amount of Contribution (\$)  \$440.00
	<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAR C LAND & CATTLE CO .....  WEATHERFORD, TX 76088	Amount of Contribution (\$)  \$100.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEAD, DANA .....  CRESTWOOD, KY 40014	Amount of Contribution (\$)  \$40.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STENT, ALEXA .....  ALEDO, TX 76008	Amount of Contribution (\$)  \$150.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STENT, NORA .....  CARSON CITY, NV 89705	Amount of Contribution (\$)  \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 200/231 Rpt: 204/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STENT, NORA	<b>7</b> Amount of Contribution (\$) \$200.00
	<b>6</b> Contributor address; City; State; Zip Code  CARSON CITY, NV 89705	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STEVENS, MIKE	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STONE, DAVID	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  HEMPSTEAD, TX 77445	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOUT, ADAM	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  DUBLIN, TX 76446	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STOUT, ADAM	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  DUBLIN, TX 76446	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 201/231 Rpt: 205/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRICKLAND, LISA ..... <b>6</b> Contributor address; City; State; Zip Code  SAN ANGELO, TX 76901	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STRUNK, AMY ADAMS ..... Contributor address; City; State; Zip Code  WALLER, TX 77484	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STUCKS, MARK ..... Contributor address; City; State; Zip Code  BURLESON, TX 76028	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUNEE RANCH ..... Contributor address; City; State; Zip Code  VALLEY VIEW, TX 76272	Amount of Contribution (\$) \$260.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SVERZUT, GUSTAVO ..... Contributor address; City; State; Zip Code  CRESSON, TX 76035	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 202/231 Rpt: 206/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SVERZUT, GUSTAVO ..... <b>6</b> Contributor address; City; State; Zip Code  CRESSON, TX 76035	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWANSON, STELLA ..... Contributor address; City; State; Zip Code  MIDLAND, TX 79710	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWANSON, STELLA ..... Contributor address; City; State; Zip Code  MIDLAND, TX 79710	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) T BAR K CUTTING HORSES ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TABOGA, RODRIGO ..... Contributor address; City; State; Zip Code  CRESSON, TX 76035	Amount of Contribution (\$) \$110.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 203/231 Rpt: 207/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAMMEN, KELLEY ..... <b>6</b> Contributor address; City; State; Zip Code  BELTON, TX 76513-7966	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAPP, JARED ..... Contributor address; City; State; Zip Code  HANSON, KY 42413	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TATUM, CHELSEA ..... Contributor address; City; State; Zip Code  OVERBROOK, OK 73453	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TATUM, CHELSEA ..... Contributor address; City; State; Zip Code  OVERBROOK, OK 73453	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, BERNARD ..... Contributor address; City; State; Zip Code  HOUSTON, MO 65483	Amount of Contribution (\$) \$280.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 204/231 Rpt: 208/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, LISA	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  PILOT POINT, TX 76258	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, PAT	Amount of Contribution (\$) \$390.00
	Contributor address; City; State; Zip Code  PILOT POINT, TX 76258	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TAYLOR, TRACY	Amount of Contribution (\$) \$95.00
	Contributor address; City; State; Zip Code  YUBA CITY, CA 95993-9713	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TD CATTLE	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  RUSTON, LA 71270	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEAGUE DIVERSIFIED	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code  COPAN, OK 74022	
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: 205/231 Rpt: 209/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEAGUE DIVERSIFIED ..... <b>6</b> Contributor address; City; State; Zip Code  COPAN, OK 74022	<b>7</b> Amount of Contribution (\$) \$80.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEIXEIRA, MARVIN ..... Contributor address; City; State; Zip Code  SANTA MARIA, CA 93454	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEIXEIRA, PAULETTE ..... Contributor address; City; State; Zip Code  SANTA MARIA, CA 93454	Amount of Contribution (\$) \$210.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEIXEIRA, PAULETTE ..... Contributor address; City; State; Zip Code  SANTA MARIA, CA 93454	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEN/27 RANCH ..... Contributor address; City; State; Zip Code  DENHAM SPRINGS, LA 70726	Amount of Contribution (\$) \$1,150.00
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: 206/231 Rpt: 210/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEN/27 RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  DENHAM SPRINGS, LA 70726	<b>7</b> Amount of Contribution (\$) \$1,565.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERLIP, KALEB ..... Contributor address; City; State; Zip Code  FRONTENAC, KS 66763	\$95.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERLIP, KALEB ..... Contributor address; City; State; Zip Code  FRONTENAC, KS 66763	\$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TERRY RIDDLE ..... Contributor address; City; State; Zip Code  FOSTER, OK 73434	\$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TETON RIDGE ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	Amount of Contribution (\$) \$200.00
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: 207/231 Rpt: 211/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXAS HOLY COW PERF HORSES ..... <b>6</b> Contributor address; City; State; Zip Code  SANTA YNEZ, CA 93460	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>8</b> Principal occupation / Job title (See Instructions)	<b>9</b> Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TG FROST LAND & CATTLE ..... Contributor address; City; State; Zip Code  LADY LAKE, FL 32159	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TG FROST LAND & CATTLE ..... Contributor address; City; State; Zip Code  LADY LAKE, FL 32159	Amount of Contribution (\$) \$120.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TG FROST LAND & CATTLE ..... Contributor address; City; State; Zip Code  LADY LAKE, FL 32159	Amount of Contribution (\$) \$60.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THAGGARD, GREG ..... Contributor address; City; State; Zip Code  MERIDIAN, MS 39305	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 208/231 Rpt: 212/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THE EL DORADO ..... <b>6</b> Contributor address; City; State; Zip Code  GRANBURY, TX 76049	<b>7</b> Amount of Contribution (\$) \$175.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THE OVER FORTY RANCH ..... Contributor address; City; State; Zip Code  WICHITA FALLS, TX 76310	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THE OYARZUN FAMILY ..... Contributor address; City; State; Zip Code  ORINDA, CA 94563	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THE STAMPEDE RANCH ..... Contributor address; City; State; Zip Code  LONGVIEW AB T0L1H0 Canada	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THIGPEN, ROBERT ..... Contributor address; City; State; Zip Code  CHILTON, TX 76632-0518	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 209/231 Rpt: 213/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THIGPEN, ROBERT	<b>7</b> Amount of Contribution (\$) \$390.00
	<b>6</b> Contributor address; City; State; Zip Code  CHILTON, TX 76632-0518	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, CAMERON MABEN	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, KENNY	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  ANDREWS, TX 79714	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, KENNY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  ANDREWS, TX 79714	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, MABEN	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  CROSSVILLE, TN 38571	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 210/231 Rpt: 214/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMPSON, RICK ..... <b>6</b> Contributor address; City; State; Zip Code  BRYAN, TX 77808	<b>7</b> Amount of Contribution (\$) \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THORSPORT ..... Contributor address; City; State; Zip Code  SANDUSKY, OH 44871	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THUMAN, LINDA ..... Contributor address; City; State; Zip Code  BRENTWOOD, CA 94513	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIEMANN, ROBERT ..... Contributor address; City; State; Zip Code  PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIEMANN, ROBERT ..... Contributor address; City; State; Zip Code  PFLUGERVILLE, TX 78660	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 211/231 Rpt: 215/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIEMANN, ROBERT .....  <b>6</b> Contributor address; City; State; Zip Code  PFLUGERVILLE, TX 78660	<b>7</b> Amount of Contribution (\$)  \$40.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TIEMANN, ROBERT .....  Contributor address; City; State; Zip Code  PFLUGERVILLE, TX 78660	Amount of Contribution (\$)  \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOWNSEND, W .....  Contributor address; City; State; Zip Code  EARTH, TX 79031	Amount of Contribution (\$)  \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRANBERG, MARIA .....  Contributor address; City; State; Zip Code  REDLANDS, CA 92373	Amount of Contribution (\$)  \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREGEMBA, ROBERT .....  Contributor address; City; State; Zip Code  CASTLE ROCK, CO 80104	Amount of Contribution (\$)  \$200.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 212/231 Rpt: 216/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREGEMBA, ROBERT	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  CASTLE ROCK, CO 80104	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRINITY VALLEY RANCH	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  WYLIE, TX 75098	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRIPLE CREST FARM	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  PADUCAH, KY 42001	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRIPLE CROWN RANCH	Amount of Contribution (\$) \$135.00
	Contributor address; City; State; Zip Code  LINCOLN, CA 95648	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TROTTER, GAYLE	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  MILLSAP, TX 76066	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 213/231 Rpt: 217/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNBULL, THOMAS M ..... <b>6</b> Contributor address; City; State; Zip Code  STEAMBOAT SPRINGS, CO 80477	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNBULL, THOMAS M ..... Contributor address; City; State; Zip Code  STEAMBOAT SPRINGS, CO 80477	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER WEST PERFORMANCE HORSES ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088-1402	Amount of Contribution (\$) \$175.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, KAITLYN ..... Contributor address; City; State; Zip Code  MILLSAP, TX 76066	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, MEL ..... Contributor address; City; State; Zip Code  MILLSAP, TX 76066	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 214/231 Rpt: 218/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TURNER, TED	<b>7</b> Amount of Contribution (\$) \$145.00
	<b>6</b> Contributor address; City; State; Zip Code  BUSHNELL, FL 33513-0900	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TWISTER T RANCH	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  HOUSTON, TX 77008	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TYLER, BOBBY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  FRIONA, TX 79035	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TYLER, BOBBY	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  FRIONA, TX 79035	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TYREE, SARA	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  SANTA TERESA, NM 88008	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 215/231 Rpt: 219/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UNLIMITED RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  HOMESTEAD, FL 33031	<b>7</b> Amount of Contribution (\$) \$115.00
	<b>8</b> Principal occupation / Job title (See Instructions) <b>9</b> Employer (See Instructions)	
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) UNLIMITED RANCH ..... Contributor address; City; State; Zip Code  HOMESTEAD, FL 33031	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) USELTON, RUSSELL ..... Contributor address; City; State; Zip Code  INDIANOLA, OK 74442	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Owner	
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN BOEKEL HOG FARMS ..... Contributor address; City; State; Zip Code  MT ELGIN ON N0J1N0 Canada	Amount of Contribution (\$) \$349.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN BOEKEL HOG FARMS ..... Contributor address; City; State; Zip Code  MT ELGIN ON N0J1N0 Canada	Amount of Contribution (\$) \$460.00
	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: 216/231 Rpt: 220/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAN BOEKEL HOG FARMS ..... <b>6</b> Contributor address; City; State; Zip Code  MT ELGIN ON N0J1N0 Canada	<b>7</b> Amount of Contribution (\$) \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDER ARK, NIKKI ..... Contributor address; City; State; Zip Code  MARIETTA, OK 73448	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDER ARK, NIKKI ..... Contributor address; City; State; Zip Code  MARIETTA, OK 73448	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANDERARK, MARVIN ..... Contributor address; City; State; Zip Code  GRANDVILLE, MI 49418	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VANVELKINBURGH, ALEXA ..... Contributor address; City; State; Zip Code  SEDALIA, CO 80135	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 217/231 Rpt: 221/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VAUGHN, MICHAEL	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  BOWIE, TX 76230	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VERMANDEL, ROBERT	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  BILLINGS, MT 59105	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VP CUTTING HORSES	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  HOUSTON, TX 77024-6945	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VP CUTTING HORSES	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  HOUSTON, TX 77024-6945	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VP CUTTING HORSES	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code  HOUSTON, TX 77024-6945	
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: 218/231 Rpt: 222/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, GENE ..... <b>6</b> Contributor address; City; State; Zip Code  ALVARADO, TX 76009	<b>7</b> Amount of Contribution (\$) \$190.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, SHELLIE ..... Contributor address; City; State; Zip Code  GAINESVILLE, TX 76240	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD, CAROL ANDERSON ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76087	Amount of Contribution (\$) \$480.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARD-CRUMMEY, KATIE ..... Contributor address; City; State; Zip Code  ACAMPO, CA 95220	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WARNE, WENDY ..... Contributor address; City; State; Zip Code  PAGELAND, SC 29728	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 219/231 Rpt: 223/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATERS, PAUL ..... <b>6</b> Contributor address; City; State; Zip Code  WETUMKA, OK 74883-6127	<b>7</b> Amount of Contribution (\$) \$175.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATSON, LISA ..... Contributor address; City; State; Zip Code  BLUFF DALE, TX 76433	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEATHERBY RANCH ..... Contributor address; City; State; Zip Code  DRAGOON, AZ 85609	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEEKS, CURTIS ..... Contributor address; City; State; Zip Code  COTULLA, TX 78014	Amount of Contribution (\$) \$525.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEEKS, CURTIS ..... Contributor address; City; State; Zip Code  COTULLA, TX 78014	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 220/231 Rpt: 224/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIS, MELISSA	<b>7</b> Amount of Contribution (\$) \$75.00
	<b>6</b> Contributor address; City; State; Zip Code  MILLSAP, TX 76066	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISBART CATTLE COMPANY	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  MANCHACA, TX 78652	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISBART CATTLE COMPANY	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  MANCHACA, TX 78652	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISS PERFORMANCE HORSES	Amount of Contribution (\$) \$220.00
	Contributor address; City; State; Zip Code  TIOGA, TX 76271	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEISS PERFORMANCE HORSES	Amount of Contribution (\$) \$115.00
	Contributor address; City; State; Zip Code  TIOGA, TX 76271	
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: 221/231 Rpt: 225/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, KRISTEN	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  FRANKTOWN, CO 80116	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, WESLEY MICHAEL	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  LUBBOCK, TX 79424	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST COAST CUTTING HORSES	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code  SANTA CRUZ, CA 95063	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEST COAST CUTTING HORSES	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  SANTA CRUZ, CA 95063	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESTERN STATES RANCHES	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  SPRINGTOWN, TX 76082	
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: 222/231 Rpt: 226/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESTFALL, RUSS ..... <b>6</b> Contributor address; City; State; Zip Code  GRANBURY, TX 76049	<b>7</b> Amount of Contribution (\$) \$75.00
	<b>8</b> Principal occupation / Job title (See Instructions) Owner	<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESTFALL, RUSS ..... Contributor address; City; State; Zip Code  GRANBURY, TX 76049	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESTFALL, RUSS ..... Contributor address; City; State; Zip Code  GRANBURY, TX 76049	Amount of Contribution (\$) \$75.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESTFALL, RUSS ..... Contributor address; City; State; Zip Code  GRANBURY, TX 76049	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESTFALL, RUSS ..... Contributor address; City; State; Zip Code  GRANBURY, TX 76049	Amount of Contribution (\$) \$465.00
	Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 223/231 Rpt: 227/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEATLEY, LINDSEY ..... <b>6</b> Contributor address; City; State; Zip Code  KAARIMBA VI 003635 Australia	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEELER DEALER CUTTING HORSES ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76086	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHEELER, RONALD ..... Contributor address; City; State; Zip Code  CLOVIS, NM 88101	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITAKER, JASON ..... Contributor address; City; State; Zip Code  SEVIERVILLE, TN 37876	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, ANNIE ..... Contributor address; City; State; Zip Code  PHILADELPHIA, MS 39350	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 224/231 Rpt: 228/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, LENA	<b>7</b> Amount of Contribution (\$) \$115.00
	<b>6</b> Contributor address; City; State; Zip Code  BRYAN, TX 77807	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE JOHNSON, LISA	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  BENSON, NC 27504	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITLEY RANCH	Amount of Contribution (\$) \$360.00
	Contributor address; City; State; Zip Code  HOUSTON, TX 77008	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WICKE, RANDY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  DECATUR, TX 76234	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WICKE, RANDY	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code  DECATUR, TX 76234	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 225/231 Rpt: 229/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, CHAD	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  STEPHENVILLE, TX 76401	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, DAYNE	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  NEW SMYRNA BEACH, FL 32169	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, DAYNE	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  NEW SMYRNA BEACH, FL 32169	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, GERDA	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  BASKERVILLE, VA 23915	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, TOM	Amount of Contribution (\$) \$255.00
	Contributor address; City; State; Zip Code  HALEYVILLE, AL 35565-0105	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 226/231 Rpt: 230/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, TOM	<b>7</b> Amount of Contribution (\$) \$40.00
	<b>6</b> Contributor address; City; State; Zip Code  HALEYVILLE, AL 35565-0105	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, TOMMY	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code  ROSIE, AR 72571	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, GREGORY	Amount of Contribution (\$) \$600.00
	Contributor address; City; State; Zip Code  FORT WORTH, TX 76107	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMSON, VIKI	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  ARGYLE, TX 76226	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, BRAD	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  LONE GROVE, OK 73443	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 227/231 Rpt: 231/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, RICHARD	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  CORDOVA, AL 35550	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WINDY PASS	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  SPICEWOOD, TX 78669	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, BILLY	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  WHITESBORO, TX 76273	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, BILLY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  WHITESBORO, TX 76273	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, BILLY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  WHITESBORO, TX 76273	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 228/231 Rpt: 232/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOLF, BILLY	<b>7</b> Amount of Contribution (\$) \$800.00
	<b>6</b> Contributor address; City; State; Zip Code  WHITESBORO, TX 76273	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, MICHAEL	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  POOLVILLE, TX 76487-5835	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, MICHAEL	Amount of Contribution (\$) \$140.00
	Contributor address; City; State; Zip Code  POOLVILLE, TX 76487-5835	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, PAULA	Amount of Contribution (\$) \$290.00
	Contributor address; City; State; Zip Code  STEPHENVILLE, TX 76401-1151	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, PAULA	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  STEPHENVILLE, TX 76401-1151	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 229/231 Rpt: 233/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOD, STAN	<b>7</b> Amount of Contribution (\$) \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  HOLLY, CO 81047	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOODS, BOBBY	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code  BLANCHARD, OK 73010	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Owner
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WR DIVERSIFIED HOLDINGS	Amount of Contribution (\$) \$220.00
	Contributor address; City; State; Zip Code  DEPORT, TX 75435	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WR DIVERSIFIED HOLDINGS	Amount of Contribution (\$) \$220.00
	Contributor address; City; State; Zip Code  DEPORT, TX 75435	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WR DIVERSIFIED HOLDINGS	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  DEPORT, TX 75435	
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: 230/231 Rpt: 234/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 12/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT RANCH	<b>7</b> Amount of Contribution (\$) \$120.00
	<b>6</b> Contributor address; City; State; Zip Code  FORT WORTH, TX 76110	
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Owner
<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, PHIL	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  FORT WORTH, TX 76110	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) WUNSCH, ASHTON	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  AUSTIN, TX 78746	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 08/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) WUNSCH, ASHTON	<b>Amount of Contribution (\$)</b> \$280.00
	<b>Contributor address; City; State; Zip Code</b>  AUSTIN, TX 78746	
<b>Principal occupation / Job title (See Instructions)</b> Owner		<b>Employer (See Instructions)</b> Owner
<b>Date</b> 12/31/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) XIT CUTTING HORSES	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  WEATHERFORD, TX 76087	
<b>Principal occupation / Job title (See Instructions)</b>		<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: 231/231 Rpt: 235/249
<b>2</b> FILER NAME NCHA's Texas Events PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00064041
<b>4</b> Date 08/28/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) XRC RANCH ..... <b>6</b> Contributor address; City; State; Zip Code  WEATHERFORD, TX 76086	<b>7</b> Amount of Contribution (\$) \$40.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YELVERTON, JERRY ..... Contributor address; City; State; Zip Code  RUSSELLVILLE, AR 72812	\$20.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YORK, KRISTEN ..... Contributor address; City; State; Zip Code  WEATHERFORD, TX 76088	\$190.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YOUNG, EDDIE ..... Contributor address; City; State; Zip Code  SAN ANGELO, TX 76906-1087	\$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZOBEL, NICOLAS ..... Contributor address; City; State; Zip Code  DAVEY, NE 68336	\$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Amount of Contribution (\$)

# 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: 1/13 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 09/18/2025	5 Payee name Ashby, Trent (Rep.)	
6 Amount (\$) \$2,500.00	7 Payee address; City; PO Box 412  Lufkin, TX 75902	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 9
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/18/2025	Payee name Bonnen, Greg (Dr.)	
Amount (\$) \$2,500.00	Payee address; City; 174 Calder Rd STE 116 League City, TX 77573	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 24
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/18/2025	Payee name Buckley, Brad (Dr.)	
Amount (\$) \$2,500.00	Payee address; City; 1321 Pershing Drive  Killeen, TX 76549	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 54
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: 2/13 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 09/18/2025	5 Payee name Chen Button, Angie (Rep.)	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code P.O. Box 832748  Richardson, TX 75083	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 112
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/18/2025	Payee name Chris Turner Campaign	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code P.O. Box 182093  Arlington, TX 76096	
<input type="checkbox"/> Expenditure from corporate funds	(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 Cointribution - HD 101
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/17/2025	Payee name DTH Strategies	
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 405 W 14TH ST  Austin, TX 78701	
<input type="checkbox"/> Expenditure from corporate funds	(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 PAC Consultng
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: 3/13 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 09/02/2025	5 Payee name DTH Strategies	
6 Amount (\$) \$20,000.00	7 Payee address; City; State; Zip Code 405 W 14TH ST  Austin, TX 78701	
<input type="checkbox"/> Expenditure from corporate funds	(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 PAC Consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name DTH Strategies	
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 405 W 14TH ST  Austin, TX 78701	
<input type="checkbox"/> Expenditure from corporate funds	(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 PAC Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name DTH Strategies	
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 405 W 14TH ST  Austin, TX 78701	
<input type="checkbox"/> Expenditure from corporate funds	(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 PAC Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/13 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 12/26/2025	5 Payee name DTH Strategies	
6 Amount (\$) \$10,000.00	7 Payee address; City; State; Zip Code 405 W 14TH ST  Austin, TX 78701	
<input type="checkbox"/> Expenditure from corporate funds	(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 PAC Consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/18/2025	Payee name David Cook Campaign	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 504 Austin Avenue  Waco, TX 76701	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution- SD 22
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/18/2025	Payee name Dyson, Paul (Rep.)	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code P.O. Box 12910  Austin, TX 78711	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 14
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/13 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 10/17/2025	5 Payee name Frost Bank	
6 Amount (\$) \$52.71	7 Payee address; City; State; Zip Code 6115 Camp Bowie Blvd, Fort Worth, TX 76116	
<input type="checkbox"/> Expenditure from corporate funds	(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 Bank Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/17/2025	Payee name Frost Bank	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 6115 Camp Bowie Blvd, Fort Worth, TX 76116	
<input type="checkbox"/> Expenditure from corporate funds	(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 Bank Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/18/2025	Payee name Frost Bank	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 6115 Camp Bowie Blvd, Fort Worth, TX 76116	
<input type="checkbox"/> Expenditure from corporate funds	(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 Bank 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: 6/13 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 09/17/2025	5 Payee name Frost Bank	
6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 6115 Camp Bowie Blvd,  Fort Worth, TX 76116	
<input type="checkbox"/> Expenditure from corporate funds	(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 Bank Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/18/2025	Payee name Gerdes, Stan	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 1011 Alley A Street, #B,  Bastrop, TX 78602	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 17
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/18/2025	Payee name Geren, Charlie (Rep.)	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 1011 Roberts Cutoff  River Oaks, TX 76114	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 99
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/13 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 09/18/2025	5 Payee name Gonzalez, Mary	
6 Amount (\$) \$2,500.00	7 Payee address; City; PO Box 450  Clint, CA 79836	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 75
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/18/2025	Payee name Hagenbuch, Brent	
Amount (\$) \$2,500.00	Payee address; City; 2800 Shoreline Dr #310  Denton, TX 76210	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - SD 30
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/18/2025	Payee name Harris, Cody	
Amount (\$) \$2,500.00	Payee address; City; 100 Avenue A  Palestine, TX 75801	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 8
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: 8/13 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 09/18/2025	5 Payee name Hunter, Todd	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code P.O. Box 2910  Austin, TX 78768-2910	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - SD 12
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/18/2025	Payee name Jeff Barry for Texas	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 2341 N. Galveston Ave  Pearland, TX 77581	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 29
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/18/2025	Payee name King, Ken	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code PO Box 507  Canadian, TX 79014	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 88
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/13 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 09/18/2025	5 Payee name King, Phil	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 2110 Fort Worth Hwy  Weatherford, TX 76086	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - SD 10
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
Date 09/18/2025	Payee name Kitzman, Stan	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code One East Main, Suite 202  Bellville, TX 77418	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 85
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
Date 09/18/2025	Payee name Leach, Jeff	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 800 Glen Rose Drive  Allen, TX 75013	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 67
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/13 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 09/18/2025	5 Payee name Longoria, Oscar	
6 Amount (\$) \$2,500.00	7 Payee address; City; PO Box 1029  Penitas, TX 78576	
<input type="checkbox"/> Expenditure from corporate funds	(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 Cointribution - HD 23
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/18/2025	Payee name McQueeney, John	
Amount (\$) \$2,500.00	Payee address; City; P.O. Box 100458  Fort Worth, TX 76185	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 97
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/18/2025	Payee name Metcalf, Will	
Amount (\$) \$2,500.00	Payee address; City; PO Box 454  Conroe, TX 77305	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 16
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/13 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 09/18/2025	5 Payee name Meyer, Morgan	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 3838 Oak Lawn Avenue, Suite 400  Dallas, TX 75219	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 108
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
Date 09/18/2025	Payee name Orr, Angelia	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 214 E. Elm Street  Hillsboro, TX 76645	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 13
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
Date 09/18/2025	Payee name Parker IV, Nathaniel (Tan)	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code PO Box 271741  Flower Mound, TX 75027-1741	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - SD 12
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/13 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 09/18/2025	5 Payee name Patterson, Jared	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 5533 FM 423, Suite 503  Frisco, TX 75034	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 106
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Philip Cortez Campaign	Office sought Office held
Date 09/18/2025	Payee name Philip Cortez Campaign	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 2600 SW Military Drive, Suite 211  San Antonio, TX 78224	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 117
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Ramon Romero Campaign	Office sought Office held
Date 09/18/2025	Payee name Ramon Romero Campaign	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code PO Box 181  Fort Worth, TX 76101	
<input type="checkbox"/> Expenditure from corporate funds	(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 Contribution - HD 90
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: 13/13 Rpt:	2 FILER NAME NCHA's Texas Events PAC	3 Filer ID (Ethics Commission Filers) 00064041
4 Date 09/18/2025	5 Payee name Raymond, Richard	
6 Amount (\$) \$2,500.00	7 Payee address; City; PO Box 450349  Laredo, TX 78045	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	<p><b>(a) Category</b> (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee</p> <p><b>(b) Description</b></p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution - HD 42</p>	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name  Shaheen, Matt	Office sought  Office held
Date 09/18/2025	Payee name  Shaheen, Matt	
Amount (\$) \$2,500.00	Payee address; City; 6501 Legacy Drive, #LL1  Plano, TX 75024	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	<p><b>(a) Category</b> (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee</p> <p><b>(b) Description</b></p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution - HD 66</p>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name  Zaffirini, Judith	Office sought  Office held
Date 09/18/2025	Payee name  Zaffirini, Judith	
Amount (\$) \$2,500.00	Payee address; City; 1407 Washington Street  Laredo, TX 78042	State; Zip Code
<input type="checkbox"/> Expenditure from corporate funds	<p><b>(a) Category</b> (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee</p> <p><b>(b) Description</b></p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution - SD 21</p>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name  Laredo, TX 78042	Office sought  Office held

**INTEREST, CREDITS, GAINS, REFUNDS, AND  
CONTRIBUTIONS RETURNED TO FILER**

**SCHEDULE K**

<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p><b>1</b> Total pages Schedule K: Sch: 1/1 Rpt: 249/249</p>
<p><b>2</b> FILER NAME NCHA's Texas Events PAC</p>		<p><b>3</b> Filer ID (Ethics Commission Filers) 00064041</p>
<p><b>4</b> Date 11/17/2025</p>	<p><b>5</b> Name of person from whom amount is received Frost Bank</p> <p>.....</p> <p><b>6</b> Address of person from whom amount is received; City; State; Zip Code Fort Worth, TX 76162</p>	<p><b>8</b> Amount (\$) \$25.00</p>
	<p><b>7</b> Purpose for which amount is received Bank Fee Refund</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 11/17/2025</p>	<p>Name of person from whom amount is received Frost Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Fort Worth, TX 76162</p>	<p>Amount (\$) \$25.00</p>
	<p>Purpose for which amount is received Bank Fee Refund</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 11/17/2025</p>	<p>Name of person from whom amount is received Frost Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Fort Worth, TX 76162</p>	<p>Amount (\$) \$52.71</p>
	<p>Purpose for which amount is received Bank Fee Refund</p>	<input type="checkbox"/> Check if political contribution returned to filer