

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers) 00089796		2 Total pages filed: 161		OFFICE USE ONLY		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.		FIRST Peter Constantine	MI MI		
	NICKNAME Doc		LAST Chambers	SUFFIX		
4 ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15		<input type="checkbox"/> Runoff		<input type="checkbox"/> Other (specify)	
	<input type="checkbox"/> July 15		<input type="checkbox"/> Exceeded modified reporting limit			
	<input type="checkbox"/> 30th day before election		<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> 8th day before election		<input type="checkbox"/> Final Report (Attach C/OH-FR)			
5 ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day	Year
		07/01/2025		THROUGH	12/31/2025	
6 EXPLANATION OF CORRECTION						

After submitting the report I realized I had left out the data before the special session filing so I needed to add additional data

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

☒ **Semiannual reports:** I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☐ **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mr. Peter Constantine Chambers

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00089796	2 Total pages filed: 161
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Peter Constantine	MI MI
	NICKNAME Doc	LAST Chambers	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 13501 Ranch Road Box 104 Wimberly , TX 78676		ZIP CODE
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Matthew C.	MI MI
	NICKNAME Matt	LAST Long	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4011 Benbrook Hwy Ste. G Fort Worth, TX 76116		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
(817) 734-3480			
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year 07/01/2025	THROUGH	Month Day Year 12/31/2025
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
	11 OFFICE OFFICE HELD (if any) None		12 OFFICE SOUGHT (if known) Governor

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Chambers, Peter Constantine (Mr.)	14 Filer ID (Ethics Commission Filers) 00089796
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 5,960.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 178,760.16
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 20,114.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 103,566.55
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 29,564.59
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT		
<p>I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.</p> <div style="text-align: right;"><u>Mr. Peter Constantine Chambers</u> Signature of Candidate or Officeholder</div>		
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.		
_____ Signature of officer administering	_____ Printed name of officer administering	_____ Title of officer administering oath

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

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18 FILER NAME Chambers, Peter Constantine (Mr.)		19 Filer ID (Ethics Commission Filers) 00089796
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 135,216.76
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 43,543.40
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 103,566.55
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/130 Rpt: 5/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abernathy, Wayne <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76107	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Self employed		9 Employer (See Instructions)
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abigail, Wolfer <hr/> Contributor address; City; State; Zip Code Patriot, IL 47038	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Debbie <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Debbie <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Debbie <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/130 Rpt: 6/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 09/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Debbie <hr/> 6 Contributor address; City; State; Zip Code Wimberley, TX 78676	7 Amount of Contribution (\$) \$183.60
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Debbie <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Scott <hr/> Contributor address; City; State; Zip Code Lufkin, TX 75901	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Truck driver		Employer (See Instructions) Self employed
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agee, Jaime <hr/> Contributor address; City; State; Zip Code Ravenna, TX 75476	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Minister		Employer (See Instructions) Banners 4 Freedom Ministries
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agee, Robert <hr/> Contributor address; City; State; Zip Code Ravenna, TX 75476	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Trustee		Employer (See Instructions) Banners 4 Freedom Ministries

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/130 Rpt: 7/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agee, Robert <hr/> 6 Contributor address; City; State; Zip Code Ravenna, TX 75476	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) Trustee		9 Employer (See Instructions) Banners 4 Freedom Ministries
Date 10/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agee, Robert <hr/> Contributor address; City; State; Zip Code Ravenna, TX 75476	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Trustee		Employer (See Instructions) Banners 4 Freedom Ministries
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Caroline <hr/> Contributor address; City; State; Zip Code Marble Falls, TX 78654	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retried		Employer (See Instructions)
Date 07/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Caroline <hr/> Contributor address; City; State; Zip Code Marble Falls, TX 78654	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retried		Employer (See Instructions)
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alford, James <hr/> Contributor address; City; State; Zip Code College, TX 77845	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) rancher		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/130 Rpt: 8/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andersen, Kathy <hr/> 6 Contributor address; City; State; Zip Code Navasota, TX 77868	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Dee Ann <hr/> Contributor address; City; State; Zip Code Maxwell, TX 78656	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) 78656		Employer (See Instructions) 78656
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Jarred <hr/> Contributor address; City; State; Zip Code Gainesville, TX 76240	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Horseshoer		Employer (See Instructions) Self
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Matthew <hr/> Contributor address; City; State; Zip Code Davenport, IA 52804	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) driver		Employer (See Instructions) Tax Air Freight
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anteri, Alejandro <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385-2226	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/130 Rpt: 9/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arias, Nancy <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78232-2116	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Recruiter		9 Employer (See Instructions) Arias
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Augusto, Erin Barker <hr/> Contributor address; City; State; Zip Code Fresno, TX 93727	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) 93727		Employer (See Instructions) 93727
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Augusto, Erin Barker <hr/> Contributor address; City; State; Zip Code Fresno, CA 93727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) none
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aune, George <hr/> Contributor address; City; State; Zip Code Lake Kiowa, TX 76240	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austad, Michael <hr/> Contributor address; City; State; Zip Code Temple, TX 76502	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/130 Rpt: 10/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austad, Michael <hr/> 6 Contributor address; City; State; Zip Code Temple, TX 76502	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAUER, DONALD <hr/> Contributor address; City; State; Zip Code HIXSON, TN 37343	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Babola, Keith <hr/> Contributor address; City; State; Zip Code Onalaska, TX 77360	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Babola, Keith <hr/> Contributor address; City; State; Zip Code Onalaska, TX 77360	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Scot <hr/> Contributor address; City; State; Zip Code Canyon Lake, TX 78133	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) ProTek Partners

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/130 Rpt: 11/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Sharon <hr/> 6 Contributor address; City; State; Zip Code Dunnellon, FL 34432	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barekman, Cheryl <hr/> Contributor address; City; State; Zip Code EULESS, TX 76039	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barringer, Maisie <hr/> Contributor address; City; State; Zip Code La Porte, TX 77571	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law office of Maisie A Barringer
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bartlett, Monica <hr/> Contributor address; City; State; Zip Code Livingston, TX 77399	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CAD Drafter		Employer (See Instructions) Optimized Engineering Services (OES)
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bashaw, Mark <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$1,836.00
Principal occupation / Job title (See Instructions) Military		Employer (See Instructions) USA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/130 Rpt: 12/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bassett, Sharleta <hr/> 6 Contributor address; City; State; Zip Code Biggs, CA 95917	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self
Date 11/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bassett, Sharleta <hr/> Contributor address; City; State; Zip Code Biggs, CA 95917	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bassett, Sharleta <hr/> Contributor address; City; State; Zip Code Biggs, CA 95917	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bassett, Sharleta <hr/> Contributor address; City; State; Zip Code Biggs, CA 95917	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bassett, Sharleta <hr/> Contributor address; City; State; Zip Code Biggs, CA 95917	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/130 Rpt: 13/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 07/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bassett, Sharleta <hr/> 6 Contributor address; City; State; Zip Code Biggs, CA 95917	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self
Date 11/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bateman Cardenas, Wendy <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Former Peace Officer		Employer (See Instructions) Unemployed
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batson, Teresa <hr/> Contributor address; City; State; Zip Code Graford, TX 76449	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batson, Teresa <hr/> Contributor address; City; State; Zip Code Graford, TX 76449	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baum, Tom <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/130 Rpt: 14/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beatty, Charles <hr/> 6 Contributor address; City; State; Zip Code Landenberg, PA 19350	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Tara <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Energy Healer		Employer (See Instructions) Self
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belew, Beverly <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Kevin <hr/> Contributor address; City; State; Zip Code Sun Prairie, WI 53590	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Weld Inspector		Employer (See Instructions) Forward Engineering
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellinghausen, Karen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75252	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/130 Rpt: 15/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellinghausen, Karen <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75252	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellows, Harry <hr/> Contributor address; City; State; Zip Code Torrance, CA 90505-6608	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benitz, Gerald <hr/> Contributor address; City; State; Zip Code Harvard, ME 01451	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) MIT Lincoln Laboratory
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benitz, Gerald <hr/> Contributor address; City; State; Zip Code Harvard, ME 01451	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) MIT Lincoln Laboratory
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Mark <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/130 Rpt: 16/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Ricky <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79464	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Oil and Gas		9 Employer (See Instructions) Self
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berthold, Carl <hr/> Contributor address; City; State; Zip Code Ingram, TX 78025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Besch, Donnie <hr/> Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigbee, Kurt <hr/> Contributor address; City; State; Zip Code Tacoma, WA 98406	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birkelbach, Aletha <hr/> Contributor address; City; State; Zip Code Pilot Point, TX 76258	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/130 Rpt: 17/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogues, Beth <hr/> 6 Contributor address; City; State; Zip Code Danbury, CT 06811	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Mother		9 Employer (See Instructions) self
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bohus, Borbala <hr/> Contributor address; City; State; Zip Code Dale, TX 78616	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolgiano, John <hr/> Contributor address; City; State; Zip Code Llano, TX 78643	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/a
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bontell, Lori <hr/> Contributor address; City; State; Zip Code Orlando, FL 32835	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Bontell & Associates
Date 07/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borgstrom, James <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/130 Rpt: 18/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowlin, Bobby <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79606	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradbury, Nikki <hr/> Contributor address; City; State; Zip Code Broken arrow, OK 74011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brantley, Jeffrey <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Product Management		Employer (See Instructions) USAA
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brice, Randy <hr/> Contributor address; City; State; Zip Code Manitowoc, WI 54221	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) LAF
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jeffrey <hr/> Contributor address; City; State; Zip Code Poteau, OK 74953	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/130 Rpt: 19/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jeffrey J 6 Contributor address; City; State; Zip Code Frisco, TX 75034	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Molina Healthcare
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Jeffrey J Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Molina Healthcare
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Browning, Jefferson Contributor address; City; State; Zip Code Wellington, FL 33414-4908	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Samuel Contributor address; City; State; Zip Code Midlothian, TX 76065	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) QRF Operator		Employer (See Instructions) Constellis
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulla, Heidi Contributor address; City; State; Zip Code Canton, GA 30115	Amount of Contribution (\$) \$66.07
Principal occupation / Job title (See Instructions) Patriot; Prayer Warrior; & Researcher		Employer (See Instructions) (In between jobs; right now; applying & waiting.)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/130 Rpt: 20/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 07/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulla, Heidi <hr/> 6 Contributor address; City; State; Zip Code Canton, GA 30115	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Patriot; Prayer Warrior; & Researcher		9 Employer (See Instructions) (In between jobs; right now; applying & waiting.)
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulla, Lori <hr/> Contributor address; City; State; Zip Code Houston, TX 77091	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CA		Employer (See Instructions) STUSCO
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bullard, Heather <hr/> Contributor address; City; State; Zip Code Lone Oak, TX 75453	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retrieved		Employer (See Instructions)
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bullitt, Margaret <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) Mon		Employer (See Instructions) self
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Busby, Stephanie <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76115	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Transportation Driver		Employer (See Instructions) Catholic Charities

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/130 Rpt: 21/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Busby, Stephanie <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76115	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) Transportation Driver		9 Employer (See Instructions) Catholic Charities
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Busby, Stephanie <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76115	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Transportation Driver		Employer (See Instructions) Catholic Charities
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buswell, Lisa <hr/> Contributor address; City; State; Zip Code Dickinson, TX 77539	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butts, Lee Anne <hr/> Contributor address; City; State; Zip Code Katy, TX 77495	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell, Brandon <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$1,836.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) AWS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/130 Rpt: 22/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 07/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Barbara <hr/> 6 Contributor address; City; State; Zip Code Grandview, TX 76050	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canchola, Katy <hr/> Contributor address; City; State; Zip Code Hockley, TX 77447	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) SAHM		Employer (See Instructions) Self
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cannon, Martha <hr/> Contributor address; City; State; Zip Code AMA, TX 79109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Care giver		Employer (See Instructions) Outreach Home Health
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canovali, Kenneth <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75042	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canovali, Kenneth <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75042	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/130 Rpt: 23/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 09/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canovali, Kenneth <hr/> 6 Contributor address; City; State; Zip Code GARLAND, TX 75042	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cappelletti, Dana <hr/> Contributor address; City; State; Zip Code Mansfield, TX 76076	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) business development		Employer (See Instructions) Charter Communications
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cappelletti, Dana <hr/> Contributor address; City; State; Zip Code Mansfield, TX 76076	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) business development		Employer (See Instructions) Charter Communications
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carden, Kenneth <hr/> Contributor address; City; State; Zip Code Channelview, TX 77530	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cargill, Robert <hr/> Contributor address; City; State; Zip Code Warrenton, MO 63383	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/130 Rpt: 24/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlins, Richard 6 Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlins, Richard Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlins, Richard Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlins, Richard Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlins, Richard Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/130 Rpt: 25/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlins, Richard 6 Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlins, Richard Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlins, Richard Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlins, Richard Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carnevale, Louis Contributor address; City; State; Zip Code Adkins, TX 78101	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/130 Rpt: 26/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casper, Sara <hr/> 6 Contributor address; City; State; Zip Code Deer Park, TX 77536	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caughlin, Judy <hr/> Contributor address; City; State; Zip Code Arlington, TX 76006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caughlin, Judy <hr/> Contributor address; City; State; Zip Code Arlington, TX 76006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caughlin, Judy <hr/> Contributor address; City; State; Zip Code Arlington, TX 76006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Case <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Oil and gas		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/130 Rpt: 27/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 07/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chastain, Linda <hr/> 6 Contributor address; City; State; Zip Code Yuba City, TX 95993	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheek, Kasey <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) HRIS Manager		Employer (See Instructions) Hummingbird
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheek, Kasey <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) HRIS Manager		Employer (See Instructions) Hummingbird
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clary, Steven <hr/> Contributor address; City; State; Zip Code Joaquin, TX 75954	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb, James <hr/> Contributor address; City; State; Zip Code Palo Pinto, TX 76484	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Auto shop owner		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/130 Rpt: 28/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb, Lisa <hr/> 6 Contributor address; City; State; Zip Code Flower Mound, TX 75028	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cockey, Cathy <hr/> Contributor address; City; State; Zip Code Baltimore, TX 21209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cocuzzi, John <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coe, Diane <hr/> Contributor address; City; State; Zip Code Grapeland, TX 75844	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coe, Diane <hr/> Contributor address; City; State; Zip Code Grapeland, TX 75844	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/130 Rpt: 29/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coe, Mark <hr/> 6 Contributor address; City; State; Zip Code Charleston, IL 61920	7 Amount of Contribution (\$) \$17.76
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coelho, Jay <hr/> Contributor address; City; State; Zip Code Arroyo Grande, CA 93420	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Donna <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Donna <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Kathleen <hr/> Contributor address; City; State; Zip Code Palestine, TX 75803	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/130 Rpt: 30/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contreras, Adrin <hr/> 6 Contributor address; City; State; Zip Code Channelview, TX 77530	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) EQ		9 Employer (See Instructions) Sales
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Kalena <hr/> Contributor address; City; State; Zip Code Van Alstyne, TX 75495-3048	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cosgray, Craig <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley, Patti <hr/> Contributor address; City; State; Zip Code Houston, TX 77068-2711	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 11/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley, Patti <hr/> Contributor address; City; State; Zip Code Houston, TX 77068-2711	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/130 Rpt: 31/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley, Patti <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77068-2711	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Self
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley, Patti <hr/> Contributor address; City; State; Zip Code Houston, TX 77068-2711	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley, Patti <hr/> Contributor address; City; State; Zip Code Houston, TX 77068-2711	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley, Patti <hr/> Contributor address; City; State; Zip Code Houston, TX 77068-2711	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croy, Theodore <hr/> Contributor address; City; State; Zip Code China Spring, TX 76633	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/130 Rpt: 32/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croy, Theodore <hr/> 6 Contributor address; City; State; Zip Code China Spring, TX 76633	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croy, Theodore <hr/> Contributor address; City; State; Zip Code China Spring, TX 76633	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croy, Theodore <hr/> Contributor address; City; State; Zip Code China Spring, TX 76633	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croy, Theodore <hr/> Contributor address; City; State; Zip Code China Spring, TX 76633	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PROFESSOR		Employer (See Instructions) LIBERTY UNIVERSITY
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuddy, David <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) manager		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/130 Rpt: 33/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cummings, Patricia <hr/> 6 Contributor address; City; State; Zip Code Lorena, TX 76655	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cummings, Patricia <hr/> Contributor address; City; State; Zip Code Lorena, TX 76655	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cummings, Patricia <hr/> Contributor address; City; State; Zip Code Lorena, TX 76655	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cummings, Patricia <hr/> Contributor address; City; State; Zip Code Lorena, TX 76655	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, JL <hr/> Contributor address; City; State; Zip Code Loris, SC 29569	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/130 Rpt: 34/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darby, Susan <hr/> 6 Contributor address; City; State; Zip Code Denton, TX 76207	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean, Tracey <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-6058	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Roofer		Employer (See Instructions) DEANCO
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dee, Robert <hr/> Contributor address; City; State; Zip Code Edwards, CA 93523	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Armed Forces		Employer (See Instructions) US Military
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dees, Dillon <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76905	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Loral dermatological beauty
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dehart, Kimberly <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76301	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/130 Rpt: 35/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delong, Jason <hr/> 6 Contributor address; City; State; Zip Code Baird, TX 79504	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Youth pastor/ veteran		9 Employer (See Instructions) Hopeforlife church
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dibble, Emmett <hr/> Contributor address; City; State; Zip Code Rosenberg, TX 77471	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) Group 1
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickey, David <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dietz, Linda <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dizzine, Patrick <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/130 Rpt: 36/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dolphin, Ed <hr/> 6 Contributor address; City; State; Zip Code Crockett, TX 75835	7 Amount of Contribution (\$) \$183.60
8 Principal occupation / Job title (See Instructions) Arborist		9 Employer (See Instructions) Self
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnell, John <hr/> Contributor address; City; State; Zip Code Decatur, TX 76234	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sr. Strategic Business Analyst		Employer (See Instructions) Army Air Force Exchange Service
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drilling, Gretchen <hr/> Contributor address; City; State; Zip Code Beaverton, OR 97007	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duggan, David <hr/> Contributor address; City; State; Zip Code Johnston, IN 50131	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Eliza <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/130 Rpt: 37/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Lynn <hr/> 6 Contributor address; City; State; Zip Code P C Beach, FL 32407	7 Amount of Contribution (\$) \$1,836.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Lynn <hr/> Contributor address; City; State; Zip Code P C Beach, FL 32407	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edmondson, Robert <hr/> Contributor address; City; State; Zip Code Bellville, TX 77418	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) maintenance		Employer (See Instructions) Sealy ISD
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Egan, Ron <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79116	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Helotes, TX 78023	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/130 Rpt: 38/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> 6 Contributor address; City; State; Zip Code Helotes, TX 78023	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Helotes, TX 78023	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Deborah <hr/> Contributor address; City; State; Zip Code Helotes, TX 78023	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emmons, Jeremy <hr/> Contributor address; City; State; Zip Code Panama City, FL 32401	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Andover Properties
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feeney, Tim <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11217	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/130 Rpt: 39/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fehlau, Amy <hr/> 6 Contributor address; City; State; Zip Code Lott, TX 76656	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feld, Jonathan <hr/> Contributor address; City; State; Zip Code San Diego, CA 92106	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Dennis <hr/> Contributor address; City; State; Zip Code Bullhead City, AZ 86429-1165	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferrell, Fran <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77316	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flanagan, Mike <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75088	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/130 Rpt: 40/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flanagan, William <hr/> 6 Contributor address; City; State; Zip Code Stanton, TX 79782	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flanagan, William <hr/> Contributor address; City; State; Zip Code Stanton, TX 79782	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flanagan, William <hr/> Contributor address; City; State; Zip Code Stanton, TX 79782	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flanagan, William <hr/> Contributor address; City; State; Zip Code Stanton, TX 79782	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fogg, Erik <hr/> Contributor address; City; State; Zip Code Bryan, TX 77803	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Pdr		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/130 Rpt: 41/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 09/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fontaine, steve <hr/> 6 Contributor address; City; State; Zip Code Azle, TX 76020	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) SAF TELECOM
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forgey, James <hr/> Contributor address; City; State; Zip Code Springtown, TX 76082	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Cornelia <hr/> Contributor address; City; State; Zip Code Grandview, TX 76050	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Sam <hr/> Contributor address; City; State; Zip Code Bonham, TX 75418	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) McCraw Oil Company
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraundorfer, David <hr/> Contributor address; City; State; Zip Code Gentryville, IN 47537	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/130 Rpt: 42/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frye, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Tyler, TX 75706	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Communications		9 Employer (See Instructions) European Wax Center
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fryzel, Melissa <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Senior Data & Systems Analyst		Employer (See Instructions) Self-Employed
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulgham, Debra <hr/> Contributor address; City; State; Zip Code Waller, TX 77484	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fullmer, Kathryn <hr/> Contributor address; City; State; Zip Code Longview, TX 75605	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulton, Marika <hr/> Contributor address; City; State; Zip Code Honey Brook, PA 19344	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/130 Rpt: 43/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuzi, William 6 Contributor address; City; State; Zip Code Athens, TX 75752	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retrieved		9 Employer (See Instructions)
Date 11/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gainer and Gaine Contributor address; City; State; Zip Code Levelland, TX 79336	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gandrud, Gregory Contributor address; City; State; Zip Code Carpinteria, CA 93013	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Xavier Contributor address; City; State; Zip Code Santa fe, NM 87507	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Michelle Contributor address; City; State; Zip Code Junction, TX 76849	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/130 Rpt: 44/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gay, Rosa <hr/> 6 Contributor address; City; State; Zip Code Mansfield, TX 76063	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geesaman, kathryn <hr/> Contributor address; City; State; Zip Code Flatonia, TX 78941	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giannini, Michael <hr/> Contributor address; City; State; Zip Code Austin, TX 77721	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Software engineer		Employer (See Instructions) Inteliblue
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert, Geraldine <hr/> Contributor address; City; State; Zip Code Aubrey, TX 76227	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, John <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/130 Rpt: 45/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glass, Van 6 Contributor address; City; State; Zip Code Arlington, TX 76017	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Eric Contributor address; City; State; Zip Code Brownfield, TX 79316	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Electrical Specialist		Employer (See Instructions) Occidental Petroleum
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Eric Contributor address; City; State; Zip Code Brownfield, TX 79316	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Electrical Specialist		Employer (See Instructions) Occidental Petroleum
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Eric Contributor address; City; State; Zip Code Brownfield, TX 79316	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Electrical Specialist		Employer (See Instructions) Occidental Petroleum
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Eric Contributor address; City; State; Zip Code Brownfield, TX 79316	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Electrical Specialist		Employer (See Instructions) Occidental Petroleum

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/130 Rpt: 46/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Eric <hr/> 6 Contributor address; City; State; Zip Code Brownfield, TX 79316	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) Electrical Specialist		9 Employer (See Instructions) Occidental Petroleum
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch, Yolanda <hr/> Contributor address; City; State; Zip Code Little Elm, TX 75068	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physical Therapy		Employer (See Instructions) N/A
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch, Yolanda <hr/> Contributor address; City; State; Zip Code Little Elm, TX 75068	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physical Therapy		Employer (See Instructions) N/A
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch, Yolanda <hr/> Contributor address; City; State; Zip Code Little Elm, TX 75068	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physical Therapy		Employer (See Instructions) N/A
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch, Yolanda <hr/> Contributor address; City; State; Zip Code Little Elm, TX 75068	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physical Therapy		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/130 Rpt: 47/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Good, Carole <hr/> 6 Contributor address; City; State; Zip Code Arroyo Grande, TX 93420-2533	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Good, Carole <hr/> Contributor address; City; State; Zip Code Arroyo Grande, TX 93420-2533	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Good, Carole <hr/> Contributor address; City; State; Zip Code Arroyo Grande, TX 93420-2533	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Good, Carole <hr/> Contributor address; City; State; Zip Code Arroyo Grande, TX 93420-2533	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Russell <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75150	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Machine Tool Programmer		Employer (See Instructions) H&S Manufacturing

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/130 Rpt: 48/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Russell <hr/> 6 Contributor address; City; State; Zip Code Mesquite, TX 75150	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Machine Tool Programmer		9 Employer (See Instructions) H&S Manufacturing
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorski, Dan <hr/> Contributor address; City; State; Zip Code Rockport, TX 78382	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Texas Mineral Resources Corp
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gossick, Pam <hr/> Contributor address; City; State; Zip Code Melissa, TX 75454	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gove, David <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Paramedic		Employer (See Instructions) Allegiance Ambulance
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Granger, Stacey <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/130 Rpt: 49/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gristy, Mark <hr/> 6 Contributor address; City; State; Zip Code Naples, FL 34110-1301	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Effective Products
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grottke, Gene <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Groves, Rick <hr/> Contributor address; City; State; Zip Code Livingston, TX 77351	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gudenschwager, Darin <hr/> Contributor address; City; State; Zip Code Davis City, IA 50065	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guruprasad, Shashikiran <hr/> Contributor address; City; State; Zip Code Bee Cave, TX 78738	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Director; Engineering		Employer (See Instructions) Fortinet Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/130 Rpt: 50/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haining, Terri <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77089	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Haining Law Group
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Rodolfo <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75150	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) SEB Professional
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Susan <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) OBBM Network TV
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Susan <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) OBBM Network TV
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Susan <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) OBBM Network TV

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/130 Rpt: 51/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamlin, David 6 Contributor address; City; State; Zip Code Wimberley, TX 78676	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamlin, David Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamlin, Lori Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammond, Pamela Contributor address; City; State; Zip Code Graford, TX 76449	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanna, Mark Contributor address; City; State; Zip Code CEDAR RAPIDS IA, IA 52404	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Call Center Rep		Employer (See Instructions) Transamerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/130 Rpt: 52/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 09/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanson II, Dale <hr/> 6 Contributor address; City; State; Zip Code Schertz, TX 78154	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, A D <hr/> Contributor address; City; State; Zip Code Spring, TX 77381	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Online
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helmer, Brenda <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hennessey, Janet <hr/> Contributor address; City; State; Zip Code Saint Louis , MO 63124	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Gardner		Employer (See Instructions) Missouri Botanical Garden
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hennigan, Rick <hr/> Contributor address; City; State; Zip Code Muenster, TX 76252	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Mechanic		Employer (See Instructions) Ace

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/130 Rpt: 53/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Vincent <hr/> 6 Contributor address; City; State; Zip Code Huntsville, TX 77340	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinsley, Ann <hr/> Contributor address; City; State; Zip Code Wolffort, TX 79382	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) FOCUS REALTY ADVISORS
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hirn, Dawn <hr/> Contributor address; City; State; Zip Code Alexander City, TX 35010	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retailer		Employer (See Instructions) self
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hitch, Theresa <hr/> Contributor address; City; State; Zip Code Tomball, TX 77377	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoglan, Macelanie <hr/> Contributor address; City; State; Zip Code Plainview, TX 79072	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Data entry		Employer (See Instructions) Rehab

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/130 Rpt: 54/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoglan, Macelanie <hr/> 6 Contributor address; City; State; Zip Code Plainview, TX 79072	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) Data entry		9 Employer (See Instructions) Rehab
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogsett, Laura <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holding, Jeanette <hr/> Contributor address; City; State; Zip Code Henrietta, TX 76365	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Retried		Employer (See Instructions)
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Gregory <hr/> Contributor address; City; State; Zip Code Frisco, TX 75033	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hood, Donald <hr/> Contributor address; City; State; Zip Code WESTERVILLE, OH 43082	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/130 Rpt: 55/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hrebek, Scott <hr/> 6 Contributor address; City; State; Zip Code Siloam Springs, AR 72761	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudson, Dan <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) SolidWood
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudson, Dan <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) SolidWood
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudson, Dan <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) SolidWood
Date 09/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudson, Dan <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) SolidWood

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/130 Rpt: 56/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudson, Dan 6 Contributor address; City; State; Zip Code Cypress, TX 77429	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) Marketing		9 Employer (See Instructions) SolidWood
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huetter, Pat Contributor address; City; State; Zip Code Mesquite, NV 89027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Judy Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Housewife		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hukill, Ryan Contributor address; City; State; Zip Code Hudson Oaks, TX 76087	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Plumber		Employer (See Instructions) Hukill,Ãs Inc
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunter, Linda Contributor address; City; State; Zip Code Springtown, TX 76082	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/130 Rpt: 57/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurt, Lola 6 Contributor address; City; State; Zip Code The Colony, TX 75056	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutcheson, Bill Contributor address; City; State; Zip Code Sherman, TX 75090	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineering Manager		Employer (See Instructions) Texas Instruments
Date 07/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Intorf, Philip Contributor address; City; State; Zip Code INCLINE VILLAGE, NV 89451-8926	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Lee Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Michael Contributor address; City; State; Zip Code Kountze, TX 77625	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/130 Rpt: 58/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Mike <hr/> 6 Contributor address; City; State; Zip Code Lufkin, TX 75904	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaco, Michael <hr/> Contributor address; City; State; Zip Code Incline village, NV 89451-8709	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobi, Monica <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) BnB owner		Employer (See Instructions) Monarc Ranch
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobsen, Lee <hr/> Contributor address; City; State; Zip Code Tye, TX 79563	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Machinist		Employer (See Instructions) Machinist
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jahnke, Eric <hr/> Contributor address; City; State; Zip Code Keene, TX 76059	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Science Teacher		Employer (See Instructions) Keene ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/130 Rpt: 59/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Edward <hr/> 6 Contributor address; City; State; Zip Code Orange, TX 77632-8705	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retrieved		9 Employer (See Instructions)

Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Edward <hr/> Contributor address; City; State; Zip Code Orange, TX 77632-8705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retrieved		Employer (See Instructions)

Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Edward <hr/> Contributor address; City; State; Zip Code Orange, TX 77632-8705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Edward <hr/> Contributor address; City; State; Zip Code Orange, TX 77632-8705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retrieved		Employer (See Instructions)

Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Edward <hr/> Contributor address; City; State; Zip Code Orange, TX 77632-8705	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retrieved		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/130 Rpt: 60/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Treva <hr/> 6 Contributor address; City; State; Zip Code Fulshear, TX 77441	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Treva <hr/> Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Alison <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Beverly <hr/> Contributor address; City; State; Zip Code Rising Star, TX 76471	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Windham
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Corina <hr/> Contributor address; City; State; Zip Code Plano, TX 75026	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Oasis Medspa

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/130 Rpt: 61/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Darryl <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) Fraud Specialist		9 Employer (See Instructions) Citibank
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Karen <hr/> Contributor address; City; State; Zip Code Burleson, TX 76028	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Gordon <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76108	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) police		Employer (See Instructions) N/a
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Josh <hr/> Contributor address; City; State; Zip Code Hawkins, TX 75765	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Construction Superintendent		Employer (See Instructions) Arco Murray
Date 09/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jorner <hr/> Contributor address; City; State; Zip Code Copperas Cove, TX 76522	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/130 Rpt: 62/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judd, CHERYL <hr/> 6 Contributor address; City; State; Zip Code Carrollton, TX 75007	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) travel		9 Employer (See Instructions) awt
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justice, Mariann <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karr, Shawn <hr/> Contributor address; City; State; Zip Code Poquoson, VA 23662	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Military		Employer (See Instructions) Usaf
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karr, Shawn <hr/> Contributor address; City; State; Zip Code Poquoson, VA 23662	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Military		Employer (See Instructions) Usaf
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karr, Shawn <hr/> Contributor address; City; State; Zip Code Poquoson, VA 23662	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Military		Employer (See Instructions) Usaf

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/130 Rpt: 63/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 09/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karr, Shawn <hr/> 6 Contributor address; City; State; Zip Code Poquoson, VA 23662	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Military		9 Employer (See Instructions) USAF
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keene, Alicia <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) RS
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Mark <hr/> Contributor address; City; State; Zip Code Little Rock, AR 72210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Lisa <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Medical		Employer (See Instructions) self
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerstetter, Debra <hr/> Contributor address; City; State; Zip Code Williamston, MI 48895	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/130 Rpt: 64/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerstetter, Debra <hr/> 6 Contributor address; City; State; Zip Code Williamston, MI 48895	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Killough, Marion <hr/> Contributor address; City; State; Zip Code Houston, TX 77015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Global Document Specialist		Employer (See Instructions) Global Document Specialist
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Brandi <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) American Airlines
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Brandi <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) American Airlines
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Garry <hr/> Contributor address; City; State; Zip Code Trinity, TX 75862	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/130 Rpt: 65/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 07/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Robert <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78258	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingsley, Nicholas <hr/> Contributor address; City; State; Zip Code Medway, MA 02053	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Systems Administrator		Employer (See Instructions) MIT
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koontz, Margaret Barnes <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krebs, Wayne <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kunze, Douglas <hr/> Contributor address; City; State; Zip Code Bryan, TX 77808	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/130 Rpt: 66/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 07/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEE, DOROTHY <hr/> 6 Contributor address; City; State; Zip Code Lynnwood, WA 98037	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacey, Brrynn <hr/> Contributor address; City; State; Zip Code Hackensack, NJ 07601	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacey, Brrynn <hr/> Contributor address; City; State; Zip Code Hackensack, NJ 07601	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacey, Brrynn <hr/> Contributor address; City; State; Zip Code Hackensack, NJ 07601	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacey, Brrynn <hr/> Contributor address; City; State; Zip Code Hackensack, NJ 07601	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/130 Rpt: 67/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacey, Brrynn <hr/> 6 Contributor address; City; State; Zip Code Hackensack, NJ 07601	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laconi, Elizabeth <hr/> Contributor address; City; State; Zip Code Frisco, TX 75033-1083	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) National Account Executive		Employer (See Instructions) Equifax
Date 12/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Amy <hr/> Contributor address; City; State; Zip Code Lake Kiowa, TX 76240	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lancaster, Amy <hr/> Contributor address; City; State; Zip Code Lake Kiowa, TX 76240	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lange, Barbara <hr/> Contributor address; City; State; Zip Code Richmons, TX 77407	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/130 Rpt: 68/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 07/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langley, Brandy <hr/> 6 Contributor address; City; State; Zip Code Texas City, TX 77590	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langley, Lisa <hr/> Contributor address; City; State; Zip Code TEXAS CITY, TX 77590	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauter Jr., David <hr/> Contributor address; City; State; Zip Code Anderson, TX 77830	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) Operations		Employer (See Instructions) West End Water Supply Corporation
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Layman, Dottie <hr/> Contributor address; City; State; Zip Code Brownwood, TX 76801	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) South Park Medical
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lazowski, Joseph <hr/> Contributor address; City; State; Zip Code Decatur, TX 76234	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Airline pilot		Employer (See Instructions) United airlines

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/130 Rpt: 69/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leege, Shawn <hr/> 6 Contributor address; City; State; Zip Code Leander, TX 78641	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leege, Shawn <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leege, Shawn <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leege, Shawn <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leege, Shawn <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/130 Rpt: 70/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 07/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leege, Shawn <hr/> 6 Contributor address; City; State; Zip Code Leander, TX 78641	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemke, Andre <hr/> Contributor address; City; State; Zip Code Post Falls, IN 83854	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Lab Tech		Employer (See Instructions) Labcorp
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lenard, Anthony <hr/> Contributor address; City; State; Zip Code Chandler, AZ 85249	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Chris <hr/> Contributor address; City; State; Zip Code Alvarado, TX 76009	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lilly, George <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/130 Rpt: 71/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lord, Allan <hr/> 6 Contributor address; City; State; Zip Code Celina, TX 75009	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Biocence Technology		9 Employer (See Instructions) Bio Scientist
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowery, Karen <hr/> Contributor address; City; State; Zip Code Grandburt, TX 66049	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowery, Natasha <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Honu Healthcare
Date 08/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowry, Robert <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) Self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luck, Jere <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) The Luck Company

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/130 Rpt: 72/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lugo, Eric <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78749	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luhning, Bryan <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lund, Christopher <hr/> Contributor address; City; State; Zip Code Houston, TX 77063	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions) ICGA
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lurty, Cathy <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M, K <hr/> Contributor address; City; State; Zip Code Oklahoma City, OK 73120	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Aveanna

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/130 Rpt: 73/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 07/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M Campbell, Eileen <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78248	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUCHOW, JEANNE <hr/> Contributor address; City; State; Zip Code HENDERSON, NV 89014	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macy Jr, Mark <hr/> Contributor address; City; State; Zip Code Holly Hill, FL 32117	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahoney, Michael <hr/> Contributor address; City; State; Zip Code Lufkin, TX 75901	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Data Analyst		Employer (See Instructions) USAA
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mai, Hong-Van <hr/> Contributor address; City; State; Zip Code Aurora, CO 80013	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/130 Rpt: 74/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloof, Marcie <hr/> 6 Contributor address; City; State; Zip Code Oak View, CA 93022	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) accountant		9 Employer (See Instructions) self
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mariotto, Christie <hr/> Contributor address; City; State; Zip Code Summer, TX 76486	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Sherri <hr/> Contributor address; City; State; Zip Code Florence, TX 76527	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massie, Christopher <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76033	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Self Employed
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Masuda, Mary Jane <hr/> Contributor address; City; State; Zip Code Honolulu, HI 96820	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Pearl Harbor Naval Shipyard

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/130 Rpt: 75/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Masuda, Mary Jane 6 Contributor address; City; State; Zip Code Honolulu, HI 96820	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Pearl Harbor Naval Shipyard
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Masuda, Mary Jane Contributor address; City; State; Zip Code Honolulu, HI 96820	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Pearl Harbor Naval Shipyard
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Masuda, Mary Jane Contributor address; City; State; Zip Code Honolulu, HI 96820	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Pearl Harbor Naval Shipyard
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matus, John Contributor address; City; State; Zip Code West, TX 76691	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Instructor		Employer (See Instructions) Texas State Technical College
Date 07/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauldin II, Ben Contributor address; City; State; Zip Code Temple, TX 76501	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/130 Rpt: 76/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Pauline 6 Contributor address; City; State; Zip Code Porter, TX 77365	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) May, Steve Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mays, Gregory Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCain, Marlana Contributor address; City; State; Zip Code Atlanta, TX 75551	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCain, Marlana Contributor address; City; State; Zip Code Atlanta, TX 75551	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/130 Rpt: 77/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCain, Marlena <hr/> 6 Contributor address; City; State; Zip Code Atlanta, TX 75551	7 Amount of Contribution (\$) \$183.60
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCain, Marlena <hr/> Contributor address; City; State; Zip Code Atlanta, TX 75551	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCallum, David <hr/> Contributor address; City; State; Zip Code Bryan, TX 77808	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClain, Frank <hr/> Contributor address; City; State; Zip Code Fruitvale, TX 75127	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Detection Engineer		Employer (See Instructions) Red Canary
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormack, Donald <hr/> Contributor address; City; State; Zip Code Valley View, TX 76272	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Southwest Medical Resources

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/130 Rpt: 78/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDanel, John <hr/> 6 Contributor address; City; State; Zip Code Sewickley, PA 15143	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Private investor		9 Employer (See Instructions) Self
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McFadden, C <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) manufacturing		Employer (See Instructions) self
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKurtis, Anne <hr/> Contributor address; City; State; Zip Code Burkburnett, TX 76354	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNair, Rebecca <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Estate Planner		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mecca, Joseph <hr/> Contributor address; City; State; Zip Code Hoven, SD 57450-2006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/130 Rpt: 79/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medrano, Bertha <hr/> 6 Contributor address; City; State; Zip Code Glendora, CA 91740	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meindl, Max <hr/> Contributor address; City; State; Zip Code Bellville, TX 77418-2201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messina-Gates, B A <hr/> Contributor address; City; State; Zip Code Fate, TX 75189	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Dianna <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76086	Amount of Contribution (\$) \$340.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michna, Joel <hr/> Contributor address; City; State; Zip Code Montalba, TX 75853	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/130 Rpt: 80/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mikelski, Annmarie <hr/> 6 Contributor address; City; State; Zip Code Del Rio, TX 78840	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Patricia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) mother		Employer (See Instructions) self
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Wimberly <hr/> Contributor address; City; State; Zip Code Gun Barrel City, TX 75156	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitschke, Allison <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mock, Sherrel <hr/> Contributor address; City; State; Zip Code Paris, TX 75461-1874	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/130 Rpt: 81/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffatt, Theresa <hr/> 6 Contributor address; City; State; Zip Code Denton, TX 76210	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monk, Michael <hr/> Contributor address; City; State; Zip Code Houston, TX 77040	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Amerisource Business Capital
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montesano, Ronald <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Civil engineer		Employer (See Instructions) Cbd inc
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Roger <hr/> Contributor address; City; State; Zip Code Deming, NM 88030	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 08/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Roger <hr/> Contributor address; City; State; Zip Code Deming, NM 88030	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/130 Rpt: 82/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Roger 6 Contributor address; City; State; Zip Code Deming, NM 88030	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Roger Contributor address; City; State; Zip Code Deming, NM 88030	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Roger Contributor address; City; State; Zip Code Deming, NM 88030	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Roger Contributor address; City; State; Zip Code Deming, NM 88030	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Roger Contributor address; City; State; Zip Code Deming, NM 88030	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/130 Rpt: 83/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 07/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Roger <hr/> 6 Contributor address; City; State; Zip Code Deming, NM 88030	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Sherry <hr/> Contributor address; City; State; Zip Code Benbrook, TX 76126	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Sherry <hr/> Contributor address; City; State; Zip Code Benbrook, TX 76126	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Sherry <hr/> Contributor address; City; State; Zip Code Benbrook, TX 76126	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Sherry <hr/> Contributor address; City; State; Zip Code Benbrook, TX 76126	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/130 Rpt: 84/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Nicholas <hr/> 6 Contributor address; City; State; Zip Code Hialeah, FL 33018	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Data Analyst		9 Employer (See Instructions) Medtronic
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morton, Paul <hr/> Contributor address; City; State; Zip Code Thorndale, TX 76577	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Locomotive Engineer		Employer (See Instructions) Locomotive Engineer
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mott, Kyle <hr/> Contributor address; City; State; Zip Code Lumberton, TX 77657	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Frederick <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76904	Amount of Contribution (\$) \$20,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Muller Metals
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Frederick <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76904	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Muller Metals

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/130 Rpt: 85/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Paul <hr/> 6 Contributor address; City; State; Zip Code Slate Hill, NY 10973-4304	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Self
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Paul <hr/> Contributor address; City; State; Zip Code Slate Hill, NY 10973-4304	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murrey (Fryzel), Melissa <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Civic Research		Employer (See Instructions) Self-Employed
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nail, Johnny <hr/> Contributor address; City; State; Zip Code New caney, TX 77357	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Matthew <hr/> Contributor address; City; State; Zip Code Spring Branch, TX 78070	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/a

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/130 Rpt: 86/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 07/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newton, Phillip <hr/> 6 Contributor address; City; State; Zip Code Haskell, TX 79521	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Vivian <hr/> Contributor address; City; State; Zip Code Palestine, TX 75803	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nied, Michael <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76123-1982	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norris, Laurie <hr/> Contributor address; City; State; Zip Code Bee Cave, TX 78738	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norris, Timothy <hr/> Contributor address; City; State; Zip Code Austin, TX 78741	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/130 Rpt: 87/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norris, Timothy <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78741	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nunn, Laura <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nunn, Laura <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nunn, Laura <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Hearn, charles <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/130 Rpt: 88/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obelgoner, James <hr/> 6 Contributor address; City; State; Zip Code Hallettsville, TX 77964	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Rad Tech		9 Employer (See Instructions) Lavaca Medical Center
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Odom, Ty <hr/> Contributor address; City; State; Zip Code Austin, TX 78747	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Military		Employer (See Instructions) USAF
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ohndorf, Hans <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75961	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Papier, Lewis <hr/> Contributor address; City; State; Zip Code New York, NY 10027	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parigi, John S. <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75087	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/130 Rpt: 89/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Robert <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77079	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Doctor		9 Employer (See Instructions) Self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Stephen <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76310-0437	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Bradley <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Terry <hr/> Contributor address; City; State; Zip Code Snow Hill, MD 21863	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearsall, Kendra <hr/> Contributor address; City; State; Zip Code Cooper, TX 75432	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/130 Rpt: 90/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peck, Douglas <hr/> 6 Contributor address; City; State; Zip Code Aurora, CO 80016	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) 80016		9 Employer (See Instructions) Charter Communications
Date 08/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peralta, Jose <hr/> Contributor address; City; State; Zip Code Brookly, NY 11221	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) home care		Employer (See Instructions) Feg Homeattendant
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Susan <hr/> Contributor address; City; State; Zip Code Abilene, TX 79601	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav <hr/> Contributor address; City; State; Zip Code Jefferson, TX 75657	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Hendrikus Group
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav <hr/> Contributor address; City; State; Zip Code Jefferson, TX 75657	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Hendrikus Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/130 Rpt: 91/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav 6 Contributor address; City; State; Zip Code Jefferson, TX 75657	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Hendrikus Group
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav Contributor address; City; State; Zip Code Jefferson, TX 75657	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Hendrikus Group
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav Contributor address; City; State; Zip Code Jefferson, TX 75657	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Hendrikus Group
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav Contributor address; City; State; Zip Code Jefferson, TX 75657	Amount of Contribution (\$) \$1,836.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Hendrikus Group
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav Contributor address; City; State; Zip Code Jefferson, TX 75657	Amount of Contribution (\$) \$1,836.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Hendrikus Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/130 Rpt: 92/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav <hr/> 6 Contributor address; City; State; Zip Code Jefferson, TX 75657	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Hendrikus Group
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petree, Brandon <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76542	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petree, Brandon <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76542	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petree, Brandon <hr/> Contributor address; City; State; Zip Code KILLEEN, TX 76542	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pevehouse, Sarah <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) 78620		Employer (See Instructions) Apogee Dripping Springs

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/130 Rpt: 93/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 09/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phelan, Chris 6 Contributor address; City; State; Zip Code Amarillo, TX 79118	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Diesel Tech		9 Employer (See Instructions) self
Date 12/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phelps, Kandace Contributor address; City; State; Zip Code Heath, TX 75032	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phelps, Kandace Contributor address; City; State; Zip Code Heath, TX 75032	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phelps, Kandace Contributor address; City; State; Zip Code Heath, TX 75032	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phelps, Kandace Contributor address; City; State; Zip Code Heath, TX 75032	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/130 Rpt: 94/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phelps, Kandace <hr/> 6 Contributor address; City; State; Zip Code Heath, TX 75032	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 07/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phelps, Kandace <hr/> Contributor address; City; State; Zip Code Heath, TX 75032	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, B <hr/> Contributor address; City; State; Zip Code Arlington, TX 76017	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Graydon <hr/> Contributor address; City; State; Zip Code Bridgeport, TX 76426-6844	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Quality assurance		Employer (See Instructions) Air national Guard
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Mrs. Benji <hr/> Contributor address; City; State; Zip Code Arlington, TX 76017	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/130 Rpt: 95/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phipps, Sandra <hr/> 6 Contributor address; City; State; Zip Code HICO, TX 76457	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickens, Jennifer <hr/> Contributor address; City; State; Zip Code Van, TX 75790	Amount of Contribution (\$) \$364.00
Principal occupation / Job title (See Instructions) Support Staff		Employer (See Instructions) State Farm Insurance
Date 07/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickett, Lori <hr/> Contributor address; City; State; Zip Code Chesapeake, VA 23322	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Tanya <hr/> Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pindar, Robert <hr/> Contributor address; City; State; Zip Code Albany, GA 31707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/130 Rpt: 96/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinkerton, Tracy <hr/> 6 Contributor address; City; State; Zip Code Lufkin, TX 75901	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pipe, Donna <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Mom		Employer (See Instructions) Self
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pires, Jessica <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) SAHM		Employer (See Instructions) Jesus
Date 07/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pontikos-Winter, Maureen <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pontillas, Rhonda <hr/> Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/130 Rpt: 97/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pontillas, Rhonda 6 Contributor address; City; State; Zip Code Spring, TX 77386	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pontius, Frederick Contributor address; City; State; Zip Code Aubrey, TX 76227	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Portie, Lana Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Retried		Employer (See Instructions)
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Jordan Contributor address; City; State; Zip Code Marshall, TX 75672	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Risk Adjustment Coder		Employer (See Instructions) Datavant
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Ken Contributor address; City; State; Zip Code Waterford, NY 12188	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Electrician		Employer (See Instructions) Tonoga Inc.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/130 Rpt: 98/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Melinda <hr/> 6 Contributor address; City; State; Zip Code Argyle, TX 76226	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Melinda <hr/> Contributor address; City; State; Zip Code Argyle, TX 76226	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pringnitz, Howard <hr/> Contributor address; City; State; Zip Code Temple, TX 76504	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pritchard, Craig <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77355	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Oil field		Employer (See Instructions) Self
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Procter, Melissa <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/130 Rpt: 99/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Procter, Melissa <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78666	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) MD		9 Employer (See Instructions) Self
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Procter, Melissa <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) Self
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Procter, Melissa <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) Self
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Queen, Richard <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radabaugh, Gregory <hr/> Contributor address; City; State; Zip Code Mico, TX 78056	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/130 Rpt: 100/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ranieri Wencel, Margaret 6 Contributor address; City; State; Zip Code Fort Worth, TX 76179-1877	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ranieri Wencel, Margaret Contributor address; City; State; Zip Code Fort Worth, TX 76179-1877	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ranieri Wencel, Margaret Contributor address; City; State; Zip Code Fort Worth, TX 76179-1877	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ranieri Wencel, Margaret Contributor address; City; State; Zip Code Fort Worth, TX 76179-1877	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rarey, Clinton Contributor address; City; State; Zip Code Purmela, TX 76566	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) FAFO Farms TX

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/130 Rpt: 101/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rarey, Clinton 6 Contributor address; City; State; Zip Code Purmela, TX 76566	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) Farmer		9 Employer (See Instructions) FAFO Farms TX
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rarey, Clinton Contributor address; City; State; Zip Code Purmela, TX 76566	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) FAFO Farms TX
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, John Contributor address; City; State; Zip Code Lakeside, TX 76108	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, John Contributor address; City; State; Zip Code Lakeside, TX 76108	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, John Contributor address; City; State; Zip Code Lakeside, TX 76108	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/130 Rpt: 102/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 09/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, John <hr/> 6 Contributor address; City; State; Zip Code Lakeside, TX 76108	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Tommy <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) self
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redding, Hershel <hr/> Contributor address; City; State; Zip Code Abilene, TX 79605	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retrieved		Employer (See Instructions)
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Regmund, Julie <hr/> Contributor address; City; State; Zip Code Benbrook, TX 76126	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Respiratory Therapist		Employer (See Instructions) Texas Health Resources
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Regmund, Julie <hr/> Contributor address; City; State; Zip Code Benbrook, TX 76126	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Respiratory Therapist		Employer (See Instructions) Texas Health Resources

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/130 Rpt: 103/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Regula, Jack` <hr/> 6 Contributor address; City; State; Zip Code Durham, NC 27705	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retrieved		9 Employer (See Instructions)
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reis, Ashton <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) American Made Realtors
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rempfer, Thomas <hr/> Contributor address; City; State; Zip Code Hereford, AZ 85615	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renfro, Rhonda <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, John <hr/> Contributor address; City; State; Zip Code Pittsboro, NC 27312	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/130 Rpt: 104/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 09/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, David <hr/> 6 Contributor address; City; State; Zip Code Willis, TX 77378	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) Online Student
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Ken <hr/> Contributor address; City; State; Zip Code Caldwell, TX 77836	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retrieved		Employer (See Instructions)
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, August <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78290	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Business Development & Marketing Consultant		Employer (See Instructions) Self Employed
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez-Pereira, Diana <hr/> Contributor address; City; State; Zip Code Fort Valley, VA 22652	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Information Technology		Employer (See Instructions) Self
Date 08/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Adam <hr/> Contributor address; City; State; Zip Code El paso, TX 79932	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/130 Rpt: 105/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Stephen <hr/> 6 Contributor address; City; State; Zip Code Needville, TX 77461	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) District Judge		9 Employer (See Instructions) State of Texas
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Veronique <hr/> Contributor address; City; State; Zip Code Pearland, TX 77581	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) VLS
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rotramble, Albert <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rozengurt, Vadim <hr/> Contributor address; City; State; Zip Code Concord, CA 94520	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Driver		Employer (See Instructions) Self Employed
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Dustin <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Shop Tech		Employer (See Instructions) DSG

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/130 Rpt: 106/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Matt <hr/> 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Aerospace Engineer		9 Employer (See Instructions) Ingenium TSI
Date 07/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SUMMERS, E MICHAEL <hr/> Contributor address; City; State; Zip Code POULSBO, WA 98370	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saber MD, Elie <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Global Nephrology & Hypertension Clinic
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas, Luis <hr/> Contributor address; City; State; Zip Code Salado, TX 76571	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions)
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samson, Jeanne <hr/> Contributor address; City; State; Zip Code Orange Park, TX 32065	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/130 Rpt: 107/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 09/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sansone, Michael <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77384-3818	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santana, Jose <hr/> Contributor address; City; State; Zip Code Seminole, FL 33772	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarles, Sharon <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) Minister & Consultant		Employer (See Instructions) The Great Shalom & Organizational Strategies
Date 12/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sartwelle, Glen <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sartwelle, Glen <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/130 Rpt: 108/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saunders, Stacey <hr/> 6 Contributor address; City; State; Zip Code Mineral Wells, TX 76067	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Accounting		9 Employer (See Instructions) Cordance
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Savage, Tony <hr/> Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saylor, Jessica <hr/> Contributor address; City; State; Zip Code Tamaroa, IL 62888	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Cna		Employer (See Instructions) None
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scally, Kathleen <hr/> Contributor address; City; State; Zip Code Dickinson, TX 77539	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaffer, Andrew <hr/> Contributor address; City; State; Zip Code Kennedale, TX 76060	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/130 Rpt: 109/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schnyder, Mitchell <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78665	7 Amount of Contribution (\$) \$7.77
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) None
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoeneberger, Carl <hr/> Contributor address; City; State; Zip Code Prosper, TX 75077	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoeneberger, Carl <hr/> Contributor address; City; State; Zip Code Prosper, TX 75077	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seals, Cheryl <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76140	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Military Community Advocate		Employer (See Instructions) Voice of Our Warriors
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seller, Brad <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 106/130 Rpt: 110/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seller, Brad <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75075	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sever, Steve <hr/> Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions) The Sealed Book
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, David <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shuffield, Bertha <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sieradzki, Stephanie <hr/> Contributor address; City; State; Zip Code Portsmouth, VA 23703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Proposal Manager		Employer (See Instructions) Epsilon Systems Solutions

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/130 Rpt: 111/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Ernest <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94103	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Tech Trainer		9 Employer (See Instructions) Broadcom
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Patty <hr/> Contributor address; City; State; Zip Code Collinsville, TX 76233	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Safety optical		Employer (See Instructions) Self employed
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skylight, Mr <hr/> Contributor address; City; State; Zip Code San Rafael, CA 94915	Amount of Contribution (\$) \$108.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Charles <hr/> Contributor address; City; State; Zip Code Hagerstown, MD 21742	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Nicole <hr/> Contributor address; City; State; Zip Code Pilot Point, TX 76258	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Pilot Point ISD

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/130 Rpt: 112/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Rhonda <hr/> 6 Contributor address; City; State; Zip Code Hitchcock, TX 77563	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) self		9 Employer (See Instructions) self
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sharon <hr/> Contributor address; City; State; Zip Code Porter, TX 77365	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sue Ann <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76088	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Alternative Healing		Employer (See Instructions) Self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smola, Mark <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southern, Norma <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79119	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/130 Rpt: 113/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Scott <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77384	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Cisco Systems
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stacy, John <hr/> Contributor address; City; State; Zip Code Grandbury, TX 76049	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stamps, Connie <hr/> Contributor address; City; State; Zip Code Waco, TX 76710	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stearns, Julie <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stine, Tanya <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78253	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance advisor		Employer (See Instructions) biBerk

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SCHEDULE A1

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2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stocker, Thomas <hr/> 6 Contributor address; City; State; Zip Code River Oaks, TX 76114	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Microsoft
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Duane <hr/> Contributor address; City; State; Zip Code Cleveland, TX 77327	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retrieved		Employer (See Instructions)
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stratton, Jarrod <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) Cable Communications Inc
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stroud, Cathy <hr/> Contributor address; City; State; Zip Code Gainesville, TX 76240	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) mom		Employer (See Instructions) self
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Brett <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78414	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/130 Rpt: 115/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Brett <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78414	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Brett <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78414	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumlin, Kelvin <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swan, Deedra <hr/> Contributor address; City; State; Zip Code Plano, TX 75093	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Notary Signing Agent		Employer (See Instructions) Self
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swan, Deedra <hr/> Contributor address; City; State; Zip Code Plano, TX 75093	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Notary Signing Agent		Employer (See Instructions) Self Employeed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/130 Rpt: 116/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweeney, Greg <hr/> 6 Contributor address; City; State; Zip Code Wylie, TX 75098	7 Amount of Contribution (\$) \$183.60
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Green Theory
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swords, Janet <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76115	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Castleberry ISD
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swords, Janet <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76115	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Castleberry ISD
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sylvester, Yolanda <hr/> Contributor address; City; State; Zip Code Spring Valley, NY 10977	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sylvester, Yolanda <hr/> Contributor address; City; State; Zip Code Spring Valley, NY 10977	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/130 Rpt: 117/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarkington, Mike <hr/> 6 Contributor address; City; State; Zip Code Dauphin Island, AL 36528	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Harry <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teakle, Lori <hr/> Contributor address; City; State; Zip Code Yerington, NV 89447	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teakle, Lori <hr/> Contributor address; City; State; Zip Code Yerington, NV 89447	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teakle, Lori <hr/> Contributor address; City; State; Zip Code Yerington, NV 89447	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/130 Rpt: 118/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 09/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teakle, Lori 6 Contributor address; City; State; Zip Code Yerington, NV 89447	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teakle, Lori Contributor address; City; State; Zip Code Yerington, NV 89447	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teakle, Lori Contributor address; City; State; Zip Code Yerington, NV 89447	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teich, Mary Ann Contributor address; City; State; Zip Code HOUSTON, TX 77070	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Templin, Rhonda Contributor address; City; State; Zip Code NURSERY, TX 77976	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/130 Rpt: 119/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terrill, Dale <hr/> 6 Contributor address; City; State; Zip Code Fort Leavenworth, KS 66027	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Infantry Officer		9 Employer (See Instructions) U.S. Army
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terrill, Dale <hr/> Contributor address; City; State; Zip Code Fort Leavenworth, KS 66027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Infantry Officer		Employer (See Instructions) U.S. Army
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terrill, Dale <hr/> Contributor address; City; State; Zip Code Fort Leavenworth, KS 66027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Infantry Officer		Employer (See Instructions) U.S. Army
Date 09/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terrill, Dale <hr/> Contributor address; City; State; Zip Code Fort Leavenworth, KS 66027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Infantry Officer		Employer (See Instructions) U.S. Army
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomson, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/130 Rpt: 120/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thornhill, Dawn <hr/> 6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Nurse Practitioner		9 Employer (See Instructions) Renew Wellness
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timura, Toni <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Valar Labs
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toliver, John <hr/> Contributor address; City; State; Zip Code Knoxville, TN 37934	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance		Employer (See Instructions) Insurance
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tomlinson, Joey <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) Prefer not say as it has no bearing on my donation
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Mary Michael <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76109	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) taking care of my parents		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/130 Rpt: 121/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trrevino, Colleen <hr/> 6 Contributor address; City; State; Zip Code Belton, TX 76513	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Stay at home Grandmother		9 Employer (See Instructions) self
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tumlinson, Joe <hr/> Contributor address; City; State; Zip Code Kountze, TX 77625	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Underhill, Vicky <hr/> Contributor address; City; State; Zip Code Crowley, TX 76036	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenzuela, Angela <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Travel Consultant		Employer (See Instructions) Acendas
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenzuela, Angela <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Travel Consultant		Employer (See Instructions) Acendas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/130 Rpt: 122/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenzuela, Angela <hr/> 6 Contributor address; City; State; Zip Code Grapevine, TX 76051	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Travel Consultant		9 Employer (See Instructions) Acendas
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valenzuela, Angela <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Travel Consultant		Employer (See Instructions) Acendas
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vandry, William <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Nutrition		Employer (See Instructions) Self
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veloz, Melissa <hr/> Contributor address; City; State; Zip Code Haltom city, TX 76117	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) XPO
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veninga, Francis <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$183.60
Principal occupation / Job title (See Instructions) retrieved		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/130 Rpt: 123/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vioni, Attorney <hr/> 6 Contributor address; City; State; Zip Code Ridgefield, CT 06877	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Edward W. Vioni
Date 09/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vonn, Dana <hr/> Contributor address; City; State; Zip Code Bedford, TX 76021	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Arts		Employer (See Instructions) Self
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WAKIN, JACKIE <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Professional Organizer		Employer (See Instructions) Self
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wahlert, Bradley <hr/> Contributor address; City; State; Zip Code CHAPPELL HILL, TX 77426	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Bobby <hr/> Contributor address; City; State; Zip Code Oakhurst, TX 77359	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/130 Rpt: 124/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Derek & Belinda 6 Contributor address; City; State; Zip Code Oakhurst, TX 77359-6668	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 08/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Derek & Belinda Contributor address; City; State; Zip Code Oakhurst, TX 77359-6668	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Derek & Belinda Contributor address; City; State; Zip Code Oakhurst, TX 77359-6668	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Derek & Belinda Contributor address; City; State; Zip Code Oakhurst, TX 77359-6668	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wall, Deborah Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/130 Rpt: 125/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 09/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wall, Rachel <hr/> 6 Contributor address; City; State; Zip Code Kountze, TX 77625	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) Store clerk		9 Employer (See Instructions) Lifecare Nutritionals LLC
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Linda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 08/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Asenath <hr/> Contributor address; City; State; Zip Code Coleman, TX 76834	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) 76834		Employer (See Instructions) Self
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Ken <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79106	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Painter		Employer (See Instructions) Self
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weller, Anna Marie <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Mom		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/130 Rpt: 126/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Katherine <hr/> 6 Contributor address; City; State; Zip Code Bruceville, TX 76630	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wied, Krystal <hr/> Contributor address; City; State; Zip Code Converse, TX 78109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Account Mgmt		Employer (See Instructions) Walthall; Sachse & Pipes
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiens, Mary <hr/> Contributor address; City; State; Zip Code Houston, TX 77043	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willey, Karen <hr/> Contributor address; City; State; Zip Code Glen Rose, TX 76043	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Cook		Employer (See Instructions) S.C.C.O.A.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Ann <hr/> Contributor address; City; State; Zip Code Choctaw, OK 73020	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/130 Rpt: 127/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Carol <hr/> 6 Contributor address; City; State; Zip Code Boyd, TX 76023	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Travis <hr/> Contributor address; City; State; Zip Code Marble Falls, TX 78654	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Austonia Technology LLC
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiseman, Karen <hr/> Contributor address; City; State; Zip Code Ft. Worth, TX 76109	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) mom		Employer (See Instructions) self
Date 08/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiseman, Karen <hr/> Contributor address; City; State; Zip Code Ft. Worth, TX 76109	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) mom		Employer (See Instructions) self
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wloch, Melody <hr/> Contributor address; City; State; Zip Code Powderly, TX 75473	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Walmart

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 124/130 Rpt: 128/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfer, Abigail <hr/> 6 Contributor address; City; State; Zip Code Patriot, IN 47038	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)

Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfer, Abigail <hr/> Contributor address; City; State; Zip Code Patriot, IN 47038	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfer, Abigail <hr/> Contributor address; City; State; Zip Code Patriot, IN 47038	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfer, Abigail <hr/> Contributor address; City; State; Zip Code Patriot, IN 47038	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self

Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfer, Abigail <hr/> Contributor address; City; State; Zip Code Patriot, IN 47038	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/130 Rpt: 129/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfer, Donna 6 Contributor address; City; State; Zip Code Huntsville, TX 77320	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) retrieved		9 Employer (See Instructions)
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolgemuth, Debbie Contributor address; City; State; Zip Code Waco, TX 76708	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Self Employed
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolgemuth, Debra Contributor address; City; State; Zip Code Waco, TX 76708	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Self
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Patricia Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Patricia Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 126/130 Rpt: 130/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 07/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Patricia 6 Contributor address; City; State; Zip Code Cypress, TX 77433	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 07/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Patricia Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) York, Clifford Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Beth Contributor address; City; State; Zip Code Junction, TX 76849	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Beth Contributor address; City; State; Zip Code Junction, TX 76849	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 127/130 Rpt: 131/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Beth <hr/> 6 Contributor address; City; State; Zip Code Junction, TX 76849	7 Amount of Contribution (\$) \$18.36
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Beth <hr/> Contributor address; City; State; Zip Code Junction, TX 76849	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zuniga, Noah <hr/> Contributor address; City; State; Zip Code Norfolk, VA 23505	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) carter, richard <hr/> Contributor address; City; State; Zip Code san francisco, CA 94114	Amount of Contribution (\$) \$10.36
Principal occupation / Job title (See Instructions) no		Employer (See Instructions) no
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) frey, laura <hr/> Contributor address; City; State; Zip Code juno beach, FL 33408	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/130 Rpt: 132/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gaddy, jake 6 Contributor address; City; State; Zip Code Buda, TX 78610	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Real estate		9 Employer (See Instructions) Self
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ivey, Donna Contributor address; City; State; Zip Code Poolville, TX 76487	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) joiner, Deborah Contributor address; City; State; Zip Code LITTLE ELM, TX 75068	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) joiner, Deborah Contributor address; City; State; Zip Code LITTLE ELM, TX 75068	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) kim, reeran Contributor address; City; State; Zip Code New York, NY 10024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 129/130 Rpt: 133/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) nolan, cyrena <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75225	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) pierce, bain <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) senior software engineer		Employer (See Instructions) cubic digital intelligence
Date 08/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) randow, martin <hr/> Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)
Date 11/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) s, Randall <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Texas Public Insurance Adjuster		Employer (See Instructions) VICTORY Claims & Showtime Exteriors
Date 11/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) seller, brad <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$18.36
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/130 Rpt: 134/161
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wood, Matthew <hr/> 6 Contributor address; City; State; Zip Code VALLEY VIEW, TX 76272	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 1/10 Rpt: 135/161	
2 FILER NAME Chambers, Peter Constantine (Mr.)				3 Filer ID (Ethics Commission Filers) 00089796	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 09/05/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A, Austin <hr/> 7 Contributor address; City; State; Zip Code Comfort, TX 78013		8 Amount of contribution (\$) \$30,000.00		9 In-kind contribution description Website dev and IT support
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Software Dev			11 Employer (FOR NON-JUDICIAL) (See instructions) Self		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Debbie <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676		Amount of contribution (\$) \$508.15		In-kind contribution description Signage
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired			Employer (FOR NON-JUDICIAL) (See instructions) Retired		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Debbie <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676		Amount of contribution (\$) \$112.08		In-kind contribution description Car magnets/yard signs to volunteers
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired			Employer (FOR NON-JUDICIAL) (See instructions) Retired		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 2/10 Rpt: 136/161	
2 FILER NAME Chambers, Peter Constantine (Mr.)				3 Filer ID (Ethics Commission Filers) 00089796	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 12/04/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Debbie		8 Amount of contribution (\$) \$335.30		9 In-kind contribution description 4x8 signage
7 Contributor address; City; State; Zip Code Wimberley, TX 78676			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired			11 Employer (FOR NON-JUDICIAL) (See instructions) Retired		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Debbie		Amount of contribution (\$) \$126.17		In-kind contribution description Campaigning material
Contributor address; City; State; Zip Code Wimberley, TX 78676			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired			Employer (FOR NON-JUDICIAL) (See instructions) Retired		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Debbie		Amount of contribution (\$) \$756.55		In-kind contribution description 4x8 signs
Contributor address; City; State; Zip Code Wimberley, TX 78676			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired			Employer (FOR NON-JUDICIAL) (See instructions) Retired		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 3/10 Rpt: 137/161	
2 FILER NAME Chambers, Peter Constantine (Mr.)				3 Filer ID (Ethics Commission Filers) 00089796	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 12/30/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Debbie		8 Amount of contribution (\$) \$738.00		9 In-kind contribution description 2x4 signs
7 Contributor address; City; State; Zip Code Wimberley, TX 78676			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired			11 Employer (FOR NON-JUDICIAL) (See instructions) Retired		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 11/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinsley, Ann		Amount of contribution (\$) \$769.00		In-kind contribution description hotel
Contributor address; City; State; Zip Code Wolffort, TX 79382			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) BOOKKEEPER			Employer (FOR NON-JUDICIAL) (See instructions) FOCUS REALTY ADVISORS		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinsley, Ann		Amount of contribution (\$) \$116.64		In-kind contribution description buttons
Contributor address; City; State; Zip Code Wolffort, TX 79382			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) BOOKKEEPER			Employer (FOR NON-JUDICIAL) (See instructions) FOCUS REALTY ADVISORS		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 4/10 Rpt: 138/161	
2 FILER NAME Chambers, Peter Constantine (Mr.)				3 Filer ID (Ethics Commission Filers) 00089796	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 12/12/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinsley, Ann		8 Amount of contribution (\$) \$250.26		9 In-kind contribution description hotel
7 Contributor address; City; State; Zip Code Wolffort, TX 79382			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) BOOKKEEPER			11 Employer (FOR NON-JUDICIAL) (See instructions) FOCUS REALTY ADVISORS		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinsley, Ann		Amount of contribution (\$) \$171.03		In-kind contribution description event venue rental
Contributor address; City; State; Zip Code Wolffort, TX 79382			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) BOOKKEEPER			Employer (FOR NON-JUDICIAL) (See instructions) FOCUS REALTY ADVISORS		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 12/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinsley, Ann		Amount of contribution (\$) \$379.50		In-kind contribution description hotel
Contributor address; City; State; Zip Code Wolffort, TX 79382			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) BOOKKEEPER			Employer (FOR NON-JUDICIAL) (See instructions) FOCUS REALTY ADVISORS		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 5/10 Rpt: 139/161	
2 FILER NAME Chambers, Peter Constantine (Mr.)				3 Filer ID (Ethics Commission Filers) 00089796	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 10/13/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Carolyn Lasater <hr style="border-top: 1px dotted black;"/> 7 Contributor address; City; State; Zip Code Dripping Springs, TX 78620		8 Amount of contribution (\$) \$200.26	9 In-kind contribution description Printing	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Realtor			11 Employer (FOR NON-JUDICIAL) (See instructions) Independent Contractor		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Carolyn Lasater <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620		Amount of contribution (\$) \$201.09	In-kind contribution description printing	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Realtor			Employer (FOR NON-JUDICIAL) (See instructions) Independent Contractor		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Carolyn Lasater <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620		Amount of contribution (\$) \$227.33	In-kind contribution description printing	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Realtor			Employer (FOR NON-JUDICIAL) (See instructions) Independent Contractor		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 6/10 Rpt: 140/161	
2 FILER NAME Chambers, Peter Constantine (Mr.)				3 Filer ID (Ethics Commission Filers) 00089796	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 11/08/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Carolyn Lasater <hr/> 7 Contributor address; City; State; Zip Code Dripping Springs, TX 78620		8 Amount of contribution (\$) \$227.33	9 In-kind contribution description printing	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Realtor			11 Employer (FOR NON-JUDICIAL) (See instructions) Independent Contractor		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Carolyn Lasater <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620		Amount of contribution (\$) \$562.90	In-kind contribution description printing	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Realtor			Employer (FOR NON-JUDICIAL) (See instructions) Independent Contractor		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Carolyn Lasater <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620		Amount of contribution (\$) \$194.85	In-kind contribution description printing	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Realtor			Employer (FOR NON-JUDICIAL) (See instructions) Independent Contractor		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 7/10 Rpt: 141/161	
2 FILER NAME Chambers, Peter Constantine (Mr.)				3 Filer ID (Ethics Commission Filers) 00089796	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 12/06/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Sherry		8 Amount of contribution (\$) \$200.00		9 In-kind contribution description EVENT VENUE rental
7 Contributor address; City; State; Zip Code Benbrook, TX 76126			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) retired			11 Employer (FOR NON-JUDICIAL) (See instructions)		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Sherry		Amount of contribution (\$) \$187.00		In-kind contribution description hotel
Contributor address; City; State; Zip Code Benbrook, TX 76126			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) retired			Employer (FOR NON-JUDICIAL) (See instructions)		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 11/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav		Amount of contribution (\$) \$250.00		In-kind contribution description hotel
Contributor address; City; State; Zip Code Jefferson, TX 75657			<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Business Owner			Employer (FOR NON-JUDICIAL) (See instructions) Hendrikus Group		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 8/10 Rpt: 142/161	
2 FILER NAME Chambers, Peter Constantine (Mr.)				3 Filer ID (Ethics Commission Filers) 00089796	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 11/25/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav <hr/> 7 Contributor address; City; State; Zip Code Jefferson, TX 75657		8 Amount of contribution (\$) \$304.00	9 In-kind contribution description magnetic signs	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Business Owner			11 Employer (FOR NON-JUDICIAL) (See instructions) Hendrikus Group		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 11/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav <hr/> Contributor address; City; State; Zip Code Jefferson, TX 75657		Amount of contribution (\$) \$270.92	In-kind contribution description 4x8 signs	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Business Owner			Employer (FOR NON-JUDICIAL) (See instructions) Hendrikus Group		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav <hr/> Contributor address; City; State; Zip Code Jefferson, TX 75657		Amount of contribution (\$) \$438.30	In-kind contribution description 4x8 signs	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Business Owner			Employer (FOR NON-JUDICIAL) (See instructions) Hendrikus Group		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: Sch: 9/10 Rpt: 143/161	
2 FILER NAME Chambers, Peter Constantine (Mr.)				3 Filer ID (Ethics Commission Filers) 00089796	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$	
5 Date 12/01/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav <hr style="border-top: 1px dotted black;"/> 7 Contributor address; City; State; Zip Code Jefferson, TX 75657		8 Amount of contribution (\$) \$897.92	9 In-kind contribution description 4x8 signs	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Business Owner			11 Employer (FOR NON-JUDICIAL) (See instructions) Hendrikus Group		
12 Contributor's principal occupation (FOR JUDICIAL)			13 Contributor's job title (FOR JUDICIAL) (See instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code Jefferson, TX 75657		Amount of contribution (\$) \$156.44	In-kind contribution description 4x8 signs	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Business Owner			Employer (FOR NON-JUDICIAL) (See instructions) Hendrikus Group		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code Jefferson, TX 75657		Amount of contribution (\$) \$323.46	In-kind contribution description Promo Buttons	
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.					
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Business Owner			Employer (FOR NON-JUDICIAL) (See instructions) Hendrikus Group		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 10/10 Rpt: 144/161	
2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/23/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav 7 Contributor address; City; State; Zip Code Jefferson, TX 75657	8 Amount of contribution (\$) \$788.10	9 In-kind contribution description 4x8 signs
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Business Owner		11 Employer (FOR NON-JUDICIAL) (See instructions) Hendrikus Group	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav Contributor address; City; State; Zip Code Jefferson, TX 75657	Amount of contribution (\$) \$3,650.03	In-kind contribution description Road Signs
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Business Owner		Employer (FOR NON-JUDICIAL) (See instructions) Hendrikus Group	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav Contributor address; City; State; Zip Code Jefferson, TX 75657	Amount of contribution (\$) \$200.79	In-kind contribution description Luncheon Event Fees
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Business Owner		Employer (FOR NON-JUDICIAL) (See instructions) Hendrikus Group	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/17 Rpt:	2 FILER NAME Chambers, Peter Constantine (Mr.)	3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/31/2025	5 Payee name Amazon	
6 Amount (\$) \$296.79	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Suite
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/06/2025	Payee name Amazon	
Amount (\$) \$672.19	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Suite
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2025	Payee name Amazon	
Amount (\$) \$648.42	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Suite
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/17 Rpt:	2 FILER NAME Chambers, Peter Constantine (Mr.)	3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/03/2025	5 Payee name Amazon	
6 Amount (\$) \$519.57	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense software suite
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/14/2025	Payee name Amazon	
Amount (\$) \$231.37	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/30/2025	Payee name Best Buy	
Amount (\$) \$811.86	Payee address; City; State; Zip Code 12909 Shops Pkwy Bee Cave, TX 78738	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sound Equipment
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/17 Rpt:	2 FILER NAME Chambers, Peter Constantine (Mr.)	3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/11/2025	5 Payee name Best Western	
6 Amount (\$) \$249.73	7 Payee address; City; State; Zip Code 3211 S First St Lufkin, TX 75901	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel rooms
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/14/2025	Payee name BizPac	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 3355 West Alabama suite 980 Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense tickets
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2025	Payee name CXN Media	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 629 Surrey Ln Flower Mound, TX 75022	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising Buys
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/17 Rpt:	2 FILER NAME Chambers, Peter Constantine (Mr.)	3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/05/2025	5 Payee name CXN Media	
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 629 Surrey Ln Flower Mound, TX 75022	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising Buys
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/01/2025	Candidate/Officeholder name Office sought Office held	
Payee name CXN Media		
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 629 Surrey Ln Flower Mound, TX 75022	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising Buys
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/24/2025	Candidate/Officeholder name Office sought Office held	
Payee name Cagle Steaks		
Amount (\$) \$524.74	Payee address; City; State; Zip Code 8732 4th St Lubbock, TX 79416	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dinner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/17 Rpt:	2 FILER NAME Chambers, Peter Constantine (Mr.)	3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/15/2025	5 Payee name Comfort Inn and Suites	
6 Amount (\$) \$326.60	7 Payee address; City; State; Zip Code 1902 E Overland Trail Abilene, TX 79601	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel rooms
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/07/2025	Candidate/Officeholder name Office sought Office held	
Payee name Courtyard by Marriott		
Amount (\$) \$250.61	Payee address; City; State; Zip Code 3150 Riverfront Dr Fort Worth, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/07/2025	Candidate/Officeholder name Office sought Office held	
Payee name Courtyard by Marriott		
Amount (\$) \$492.89	Payee address; City; State; Zip Code 3150 Riverfront Dr Fort Worth, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/17 Rpt:	2 FILER NAME Chambers, Peter Constantine (Mr.)	3 Filer ID (Ethics Commission Filers) 00089796
4 Date 09/17/2025	5 Payee name Hays City Store	
6 Amount (\$) \$237.42	7 Payee address; City; State; Zip Code 8989 FM 150 Driftwood, TX 78619	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dinner
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2025	Payee name Hilton Garden Inn	
Amount (\$) \$293.28	Payee address; City; State; Zip Code 905 East Hawkins Parkway Longview, TX 75605	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel rooms
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2025	Payee name Holiday Inn Express	
Amount (\$) \$1,405.62	Payee address; City; State; Zip Code 1616 Main St Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel rooms
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/17 Rpt:	2 FILER NAME Chambers, Peter Constantine (Mr.)	3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/22/2025	5 Payee name Holiday Inn Express	
6 Amount (\$) \$376.87	7 Payee address; City; State; Zip Code 5701 Legendlake Pkwy Waco, TX 76712	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel rooms
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/18/2025	Candidate/Officeholder name Office sought Office held	
Payee name Horseshoe Ridge		
Amount (\$) \$1,199.00	Payee address; City; State; Zip Code 17901 Ranch Road 12 Wimberley, TX 78676	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense RV slot rental
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/08/2025	Candidate/Officeholder name Office sought Office held	
Payee name La Quinta Motor Inns		
Amount (\$) \$280.60	Payee address; City; State; Zip Code 1405 S Hwy 287 Decatur, TX 76234	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/17 Rpt:	2 FILER NAME Chambers, Peter Constantine (Mr.)	3 Filer ID (Ethics Commission Filers) 00089796
4 Date 10/02/2025	5 Payee name Lowes	
6 Amount (\$) \$389.70	7 Payee address; City; State; Zip Code 12611 Shops at the Galleria Pkwy Austin, TX 78738	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Storage Boxes
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2025	Payee name Nortex Lube & Tire	
Amount (\$) \$292.87	Payee address; City; State; Zip Code 908 N State Highway 121 Bonham, TX 75418	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Auto Exp
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2025	Payee name Orbitz.com	
Amount (\$) \$241.11	Payee address; City; State; Zip Code 500 W. Madiso Street Suite 1000 Chicago, IL 60661	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/17 Rpt:	2 FILER NAME Chambers, Peter Constantine (Mr.)	3 Filer ID (Ethics Commission Filers) 00089796
4 Date 11/21/2025	5 Payee name Owens, Carl	
6 Amount (\$) \$252.66	7 Payee address; City; State; Zip Code 180 Joe Wimberley Blvd Wimberley, TX 78676	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Elec Bill for office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2025	Payee name Owens, Carl	
Amount (\$) \$90.41	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Wimberley, TX 78676	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Elec bill
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/01/2025	Payee name Print & Pixel	
Amount (\$) \$3,531.12	Payee address; City; State; Zip Code 222 US 290 Dripping Springs, TX 78620	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Information Push Cards
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/17 Rpt:	2 FILER NAME Chambers, Peter Constantine (Mr.)	3 Filer ID (Ethics Commission Filers) 00089796
4 Date 08/14/2025	5 Payee name Print & Pixel	
6 Amount (\$) \$383.21	7 Payee address; City; State; Zip Code 222 US 290 Dripping Springs, TX 78620	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Information cards
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2025	Payee name Print This	
Amount (\$) \$5,301.87	Payee address; City; State; Zip Code 13330 N. State Highway 123 Seguin, TX 78155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Sign
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/30/2025	Payee name Print This	
Amount (\$) \$5,196.00	Payee address; City; State; Zip Code 13330 N. State Highway 123 Seguin, TX 78155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard signs
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/17 Rpt:	2 FILER NAME Chambers, Peter Constantine (Mr.)	3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/05/2025	5 Payee name Print This	
6 Amount (\$) \$9,136.30	7 Payee address; City; State; Zip Code 13330 N. State Highway 123 Seguin, TX 78155	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/23/2025	Payee name Print This	
Amount (\$) \$5,196.00	Payee address; City; State; Zip Code 13330 N. State Highway 123 Seguin, TX 78155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/14/2025	Payee name Republican Party of Texas	
Amount (\$) \$3,750.00	Payee address; City; State; Zip Code 205 W 14th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filling Fee
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/17 Rpt:	2 FILER NAME Chambers, Peter Constantine (Mr.)	3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/10/2025	5 Payee name Ritter, S	
6 Amount (\$) \$10,000.00	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Jasper, AR 72641	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising Support
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2025	Payee name Sleep Inn	
Amount (\$) \$306.93	Payee address; City; State; Zip Code 250 Killough Cove Abilene, TX 79601	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel rooms
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/23/2025	Payee name Spectrum	
Amount (\$) \$277.54	Payee address; City; State; Zip Code 5167 Kyle Canter Dr Kyle, TX 78640	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/17 Rpt:	2 FILER NAME Chambers, Peter Constantine (Mr.)	3 Filer ID (Ethics Commission Filers) 00089796
4 Date 09/18/2025	5 Payee name Staccato Ranch	
6 Amount (\$) \$2,669.52	7 Payee address; City; State; Zip Code 1275 County Road 233 Florence, TX 76527	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event meet and greet
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/14/2025	Payee name Taste of Texas	
Amount (\$) \$598.99	Payee address; City; State; Zip Code 10505 Katy Fwy Houston, TX 77024	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dinner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/13/2025	Payee name Tejano Tire Shop	
Amount (\$) \$730.00	Payee address; City; State; Zip Code 27102 FM 2978 Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Auto Exp
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/17 Rpt:	2 FILER NAME Chambers, Peter Constantine (Mr.)	3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/01/2025	5 Payee name Texas Roadhouse	
6 Amount (\$) \$254.46	7 Payee address; City; State; Zip Code 23102 IH - 10 San Antonio, TX 78257	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dinner
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/12/2025	Payee name Traildust Stakehouse	
Amount (\$) \$302.00	Payee address; City; State; Zip Code 1200 S I-35 Sanger, TX 76266	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dinner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2025	Payee name Versatile Production Inc	
Amount (\$) \$340.00	Payee address; City; State; Zip Code 12644 Hwy 82 Carbondale, CO 81623	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video Production
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/17 Rpt:	2 FILER NAME Chambers, Peter Constantine (Mr.)	3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/19/2025	5 Payee name Westin Oaks Houston	
6 Amount (\$) \$377.29	7 Payee address; City; State; Zip Code 5011 Westheimer Rd Houston, TX 77056	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel Rooms
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2025	Payee name Wimberly, Joe	
Amount (\$) \$1,755.00	Payee address; City; State; Zip Code 180 Joe Wimberley Blvd Wimberley, TX 78676	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2025	Payee name Wimberly, Joe	
Amount (\$) \$1,755.00	Payee address; City; State; Zip Code 180 Joe Wimberley Blvd Wimberley, TX 78676	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Rent
Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/17 Rpt:	2 FILER NAME Chambers, Peter Constantine (Mr.)	3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/10/2025	5 Payee name Wimberly, Joe	
6 Amount (\$) \$1,755.00	7 Payee address; City; State; Zip Code 180 Joe Wimberley Blvd Wimberley, TX 78676	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Rent
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/31/2025	Candidate/Officeholder name Office sought Office held	
Payee name Wimberly, Joe		
Amount (\$) \$1,755.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Wimberley, TX 78676	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/15/2025	Candidate/Officeholder name Office sought Office held	
Payee name Wimberly, Joe		
Amount (\$) \$877.50	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Wimberley, TX 78676	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/17 Rpt:	2 FILER NAME Chambers, Peter Constantine (Mr.)	3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/08/2025	5 Payee name XAI	
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 865 FM 1209 Building 2 Bastrop, TX 78602	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/22/2025	Payee name vista print	
Amount (\$) \$1,419.51	Payee address; City; State; Zip Code 275 Wyman St Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Portable signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held