

**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				
						Date Received		
3 CANDIDATE / OFFICEHOLDER NAME		FIRST Mr. Peter Constantine		ELECTRONICALLY FILED 01/15/2026				
		NICKNAME Doc Chambers		Date Hand-delivered or Date Postmarked				
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	Receipt # _____				
		<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)	Amount _____				
		<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report (Attach C/OH-FR)	Date Processed				
5 ORIGINAL PERIOD COVERED		Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year	Date Imaged
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. Peter Constantine			OFFICE USE ONLY
	NICKNAME LAST SUFFIX Doc Chambers			Date Received ELECTRONICALLY FILED 01/15/2026
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			Date Hand-delivered or Date Postmarked
				Receipt # <input type="text"/> Amount <input type="text"/>
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr. Matthew C.			MI
	NICKNAME LAST SUFFIX Matt Long			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 4011 Benbrook Hwy Ste. G Fort Worth, TX 76116			APT / SUITE #; CITY; STATE; ZIP CODE
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 07/01/2025	Day	Year	Month 12/31/2025 Day Year
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026	<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
15 NOTICE FROM POLITICAL COMMITTEE(S)	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.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 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

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.

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

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 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 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 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 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 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	7 Amount of Contribution (\$) \$183.60
	6 Contributor address; City; State; Zip Code Wimberley, TX 78676	
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	Amount of Contribution (\$) \$183.60
	Contributor address; City; State; Zip Code Wimberley, TX 78676	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Lufkin, TX 75901	
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#: _____) Agree, Jaime	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code Ravenna, TX 75476	
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#: _____) Agree, Robert	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Ravenna, TX 75476	
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#: _____) Agree, Robert	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Ravenna, TX 75476	
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#: _____) Agree, Robert	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Ravenna, TX 75476	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Marble Falls, TX 78654	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Caroline	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Marble Falls, TX 78654	
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#: _____) Alford, James	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code College, TX 77845	
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	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Navasota, TX 77868	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Maxwell, TX 78656	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Gainesville, TX 76240	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Davenport, IA 52804	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Conroe, TX 77385-2226	
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	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78232-2116	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Fresno, TX 93727	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Fresno, CA 93727	
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	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Lake Kiowa, TX 76240	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Temple, TX 76502	
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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Temple, TX 76502	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code HIXSON, TN 37343	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Onalaska, TX 77360	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Onalaska, TX 77360	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Biggs, CA 95917	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Biggs, CA 95917	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Biggs, CA 95917	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Biggs, CA 95917	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Biggs, CA 95917	
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	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Biggs, CA 95917	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Seguin, TX 78155	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Graford, TX 76449	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Graford, TX 76449	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Buda, TX 78610	
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	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code Landenberg, PA 19350	
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	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dripping Springs, TX 78620	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76116	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Sun Prairie, WI 53590	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75252	
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 6 Contributor address; City; State; Zip Code Dallas, TX 75252	7 Amount of Contribution (\$) \$25.00	
8 Principal occupation / Job title (See Instructions) retried		9 Employer (See Instructions)	
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellows, Harry Contributor address; City; State; Zip Code Torrance, CA 90505-6608	Amount of Contribution (\$) \$50.00	
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) MIT Lincoln Laboratory	
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benitz, Gerald 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 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 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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Lubbock, TX 79464	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Ingram, TX 78025	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Tacoma, WA 98406	
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	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Pilot Point, TX 76258	
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	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Danbury, CT 06811	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Dale, TX 78616	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Llano, TX 78643	
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	Amount of Contribution (\$) \$183.60
	Contributor address; City; State; Zip Code Orlando, FL 32835	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Austin, TX 78750	
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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Abilene, TX 79606	
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	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Broken arrow, OK 74011	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Austin, TX 78735	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Manitowoc, WI 54221	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Poteau, OK 74953	
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: 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	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Canton, GA 30115	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77091	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Lone Oak, TX 75453	
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bullitt, Margaret	Amount of Contribution (\$) \$183.60
	Contributor address; City; State; Zip Code Fredericksburg, TX 78624	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76115	
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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76115	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Fort Worth, TX 76115	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Dickinson, TX 77539	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Katy, TX 77495	
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	Amount of Contribution (\$) \$1,836.00
	Contributor address; City; State; Zip Code Dripping Springs, TX 78620	
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	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Grandview, TX 76050	
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	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Hockley, TX 77447	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code AMA, TX 79109	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code GARLAND, TX 75042	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code GARLAND, TX 75042	
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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code GARLAND, TX 75042	
8 Principal occupation / Job title (See Instructions) business development		9 Employer (See Instructions) Charter Communications
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cappelletti, Dana	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Mansfield, TX 76076	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Mansfield, TX 76076	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Channelview, TX 77530	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Warrenton, MO 63383	
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	7 Amount of Contribution (\$) \$125.00
	6 Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	
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	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlins, Richard	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	
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	Amount of Contribution (\$) \$400.00
	Contributor address; City; State; Zip Code Fruitland Park, FL 34731-6107	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Adkins, TX 78101	
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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Deer Park, TX 77536	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Arlington, TX 76006	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Arlington, TX 76006	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Arlington, TX 76006	
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	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code Abilene, TX 79602	
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 6 Contributor address; City; State; Zip Code Yuba City, TX 95993	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) HRIS Manager		9 Employer (See Instructions) Hummingbird
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheek, Kasey 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 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 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 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	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Flower Mound, TX 75028	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Baltimore, TX 21209	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code San Angelo, TX 76901	
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#: _____) Coe, Diane	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Grapeland, TX 75844	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Grapeland, TX 75844	
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	7 Amount of Contribution (\$) \$17.76
	6 Contributor address; City; State; Zip Code Charleston, IL 61920	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Arroyo Grande, CA 93420	
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	Amount of Contribution (\$) \$183.60
	Contributor address; City; State; Zip Code Fort Worth, TX 76107	
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	Amount of Contribution (\$) \$183.60
	Contributor address; City; State; Zip Code Fort Worth, TX 76107	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Palestine, TX 75803	
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	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Channelview, TX 77530	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Van Alstyne, TX 75495-3048	
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	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Spicewood, TX 78669	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77068-2711	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77068-2711	
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 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 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 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 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 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 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	
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croy, Theodore Contributor address; City; State; Zip Code China Spring, TX 76633	Amount of Contribution (\$) \$18.36
	Principal occupation / Job title (See Instructions) retired	
Date 09/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croy, Theodore Contributor address; City; State; Zip Code China Spring, TX 76633	Amount of Contribution (\$) \$18.36
	Principal occupation / Job title (See Instructions)	
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croy, Theodore Contributor address; City; State; Zip Code China Spring, TX 76633	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) PROFESSOR	
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuddy, David 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 Cummings, Patricia	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Lorena, TX 76655	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/01/2025	Full name of contributor Cummings, Patricia	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Lorena, TX 76655	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/01/2025	Full name of contributor Cummings, Patricia	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Lorena, TX 76655	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/01/2025	Full name of contributor Cummings, Patricia	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Lorena, TX 76655	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/19/2025	Full name of contributor DUNN, JL	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Loris, SC 29569	
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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Denton, TX 76207	
8 Principal occupation / Job title (See Instructions) Roofer		9 Employer (See Instructions) DEANCO
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean, Tracey	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Kyle, TX 78640-6058	
Principal occupation / Job title (See Instructions) Armed Forces		Employer (See Instructions) US Military
Date 09/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dee, Robert	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Edwards, CA 93523	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Loral dermatological beauty
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dees, Dillon	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Angelo, TX 76905	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$183.60
	6 Contributor address; City; State; Zip Code Crockett, TX 75835	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Decatur, TX 76234	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Beaverton, OR 97007	
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	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Johnston, IN 50131	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77057	
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	7 Amount of Contribution (\$) \$1,836.00
	6 Contributor address; City; State; Zip Code P C Beach, FL 32407	
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	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code P C Beach, FL 32407	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Bellville, TX 77418	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Amarillo, TX 79116	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Helotes, TX 78023	
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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Helotes, TX 78023	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Helotes, TX 78023	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Helotes, TX 78023	
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	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Panama City, FL 32401	
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#: _____) Feehey, Tim	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Brooklyn, NY 11217	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Stanton, TX 79782	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Stanton, TX 79782	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Stanton, TX 79782	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Stanton, TX 79782	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Bryan, TX 77803	
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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Azle, TX 76020	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Springtown, TX 76082	
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	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Grandview, TX 76050	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Bonham, TX 75418	
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	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Gentryville, IN 47537	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Athens, TX 75752	
8 Principal occupation / Job title (See Instructions) retried		9 Employer (See Instructions)
Date 11/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gainer and Gaine	Amount of Contribution (\$) \$400.00
	Contributor address; City; State; Zip Code Levelland, TX 79336	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Carpinteria, CA 93013	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Santa fe, NM 87507	
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	Amount of Contribution (\$) \$183.60
	Contributor address; City; State; Zip Code Junction, TX 76849	
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	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Mansfield, TX 76063	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Flatonia, TX 78941	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Austin, TX 77721	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Aubrey, TX 76227	
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#: _____) Glaser, John	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78254	
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	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Arlington, TX 76017	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Brownfield, TX 79316	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Brownfield, TX 79316	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Brownfield, TX 79316	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Brownfield, TX 79316	
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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Brownfield, TX 79316	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Little Elm, TX 75068	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Little Elm, TX 75068	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Little Elm, TX 75068	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Little Elm, TX 75068	
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 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	
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Good, Carole Contributor address; City; State; Zip Code Arroyo Grande, TX 93420-2533	Amount of Contribution (\$) \$18.36
	Principal occupation / Job title (See Instructions) retired	
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Good, Carole Contributor address; City; State; Zip Code Arroyo Grande, TX 93420-2533	Amount of Contribution (\$) \$18.36
	Principal occupation / Job title (See Instructions) retired	
Date 09/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Good, Carole Contributor address; City; State; Zip Code Arroyo Grande, TX 93420-2533	Amount of Contribution (\$) \$18.36
	Principal occupation / Job title (See Instructions) retired	
Date 11/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Russell 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	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Mesquite, TX 75150	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Rockport, TX 78382	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Melissa, TX 75454	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Carrollton, TX 75007	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Spicewood, TX 78669	
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	7 Amount of Contribution (\$) \$7.00
	6 Contributor address; City; State; Zip Code Naples, FL 34110-1301	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Austin, TX 78737	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Livingston, TX 77351	
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	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Davis City, IA 50065	
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	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Bee Cave, TX 78738	
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	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Houston, TX 77089	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Mesquite, TX 75150	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Richardson, TX 75081	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Richardson, TX 75081	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Richardson, TX 75081	
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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Wimberley, TX 78676	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Wimberley, TX 78676	
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	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Wimberley, TX 78676	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Graford, TX 76449	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code CEDAR RAPIDS IA, IA 52404	
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	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Schertz, TX 78154	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Spring, TX 77381	
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	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76107	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Saint Louis , MO 63124	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Muenster, TX 76252	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Plainview, TX 79072	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Conroe, TX 77384	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Henrietta, TX 76365	
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	Amount of Contribution (\$) \$183.60
	Contributor address; City; State; Zip Code Frisco, TX 75033	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code WESTERVILLE, OH 43082	
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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Siloam Springs, AR 72761	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Cypress, TX 77429	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Cypress, TX 77429	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Cypress, TX 77429	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Cypress, TX 77429	
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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Cypress, TX 77429	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Mesquite, NV 89027	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Austin, TX 78758	
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	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Hudson Oaks, TX 76087	
Principal occupation / Job title (See Instructions) Plumber		Employer (See Instructions) Hukill,Äôs Inc
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunter, Linda	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Springtown, TX 76082	
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	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code The Colony, TX 75056	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Sherman, TX 75090	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code INCLINE VILLAGE, NV 89451-8926	
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	Amount of Contribution (\$) \$183.60
	Contributor address; City; State; Zip Code Austin, TX 78734	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Kountze, TX 77625	
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 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 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 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 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 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 6 Contributor address; City; State; Zip Code Orange, TX 77632-8705	7 Amount of Contribution (\$) \$100.00
	8 Principal occupation / Job title (See Instructions) retried	
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Edward Contributor address; City; State; Zip Code Orange, TX 77632-8705	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) retried	
Date 09/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Edward Contributor address; City; State; Zip Code Orange, TX 77632-8705	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions)	
Date 08/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Edward Contributor address; City; State; Zip Code Orange, TX 77632-8705	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) retried	
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Edward Contributor address; City; State; Zip Code Orange, TX 77632-8705	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) retried	

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 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 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 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 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 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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	
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	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Burleson, TX 76028	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Fort Worth, TX 76108	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Hawkins, TX 75765	
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#: _____) Jormer	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Copperas Cove, TX 76522	
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	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Carrollton, TX 75007	
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	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code The Woodlands, TX 77382	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Poquoson, VA 23662	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Poquoson, VA 23662	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Poquoson, VA 23662	
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	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Poquoson, VA 23662	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Spicewood, TX 78669	
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	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Little Rock, AR 72210	
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	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
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	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Williamston, MI 48895	
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	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Williamston, MI 48895	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77015	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
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	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Trinity, TX 75862	
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 6 Contributor address; City; State; Zip Code San Antonio, TX 78258	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Systems Administrator		9 Employer (See Instructions) MIT
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingsley, Nicholas Contributor address; City; State; Zip Code Medway, MA 02053	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koontz, Margaret Barnes 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 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 Contributor address; City; State; Zip Code Bryan, TX 77808	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: 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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Lynnwood, WA 98037	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacey, Brrynn	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Hackensack, NJ 07601	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Hackensack, NJ 07601	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Hackensack, NJ 07601	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Hackensack, NJ 07601	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

MONETARY POLITICAL CONTRIBUTIONS

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 6 Contributor address; City; State; Zip Code Texas City, TX 77590	7 Amount of Contribution (\$) \$100.00	
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#: _____) Langley, Lisa Contributor address; City; State; Zip Code TEXAS CITY, TX 77590	Amount of Contribution (\$) \$18.36	
Principal occupation / Job title (See Instructions) Operations		Employer (See Instructions) West End Water Supply Corporation	
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauter Jr., David Contributor address; City; State; Zip Code Anderson, TX 77830	Amount of Contribution (\$) \$183.60	
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) South Park Medical	
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Layman, Dottie Contributor address; City; State; Zip Code Brownwood, TX 76801	Amount of Contribution (\$) \$500.00	
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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Leander, TX 78641	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Leander, TX 78641	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Leander, TX 78641	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Leander, TX 78641	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Leander, TX 78641	
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: 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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Leander, TX 78641	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Post Falls, IN 83854	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Chandler, AZ 85249	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Alvarado, TX 76009	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Kyle, TX 78640	
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 Lord, Allan 6 Contributor address; City; State; Zip Code Celina, TX 75009	7 Amount of Contribution (\$) \$50.00	
8 Principal occupation / Job title (See Instructions) Biocene Technology		9 Employer (See Instructions) Bio Scientist	
Date 10/06/2025	Full name of contributor Lowery, Karen Contributor address; City; State; Zip Code Grandbury, 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 Lowery, Natasha 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 Lowry, Robert 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 Luck, Jere 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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Austin, TX 78749	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dripping Springs, TX 78620	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77063	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Allen, TX 75013	
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	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Oklahoma City, OK 73120	
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Aveanna

MONETARY POLITICAL CONTRIBUTIONS

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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78248	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code HENDERSON, NV 89014	
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	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Holly Hill, FL 32117	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Lufkin, TX 75901	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Aurora, CO 80013	
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: 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 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 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 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 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 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	

MONETARY POLITICAL CONTRIBUTIONS

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	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Honolulu, HI 96820	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Honolulu, HI 96820	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Honolulu, HI 96820	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code West, TX 76691	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Temple, TX 76501	
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: 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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Porter, TX 77365	
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	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Houston, TX 77059	
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	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Antonio, TX 78216	
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, Marlena	Amount of Contribution (\$) \$183.60
	Contributor address; City; State; Zip Code Atlanta, TX 75551	
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, Marlena	Amount of Contribution (\$) \$183.60
	Contributor address; City; State; Zip Code Atlanta, TX 75551	
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: 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	7 Amount of Contribution (\$) \$183.60
	6 Contributor address; City; State; Zip Code Atlanta, TX 75551	
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	Amount of Contribution (\$) \$183.60
	Contributor address; City; State; Zip Code Atlanta, TX 75551	
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	Amount of Contribution (\$) \$183.60
	Contributor address; City; State; Zip Code Bryan, TX 77808	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Fruitvale, TX 75127	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Valley View, TX 76272	
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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Sewickley, PA 15143	
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	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77027	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Burkburnett, TX 76354	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Boerne, TX 78006	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Hoven, SD 57450-2006	
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 6 Contributor address; City; State; Zip Code Glendora, CA 91740	7 Amount of Contribution (\$) \$50.00
	8 Principal occupation / Job title (See Instructions) retired	
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meindl, Max Contributor address; City; State; Zip Code Bellville, TX 77418-2201	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) retired	
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messina-Gates, B A Contributor address; City; State; Zip Code Fate, TX 75189	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) retired	
Date 09/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Dianna Contributor address; City; State; Zip Code Weatherford, TX 76086	Amount of Contribution (\$) \$340.00
	Principal occupation / Job title (See Instructions) Retired	
Date 12/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michna, Joel Contributor address; City; State; Zip Code Montalba, TX 75853	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) retried	

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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Del Rio, TX 78840	
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	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Gun Barrel City, TX 75156	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitschke, Allison	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77024	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Paris, TX 75461-1874	
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, Theressa	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Denton, TX 76210	
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	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Houston, TX 77040	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Buda, TX 78610	
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	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Deming, NM 88030	
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	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Deming, NM 88030	
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	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Deming, NM 88030	
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	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Deming, NM 88030	
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	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Deming, NM 88030	
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	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Deming, NM 88030	
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	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Deming, NM 88030	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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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	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Deming, NM 88030	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Benbrook, TX 76126	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Benbrook, TX 76126	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Benbrook, TX 76126	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Benbrook, TX 76126	
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	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Hialeah, FL 33018	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Thorndale, TX 76577	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Lumberton, TX 77657	
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	Amount of Contribution (\$) \$20,000.00
	Contributor address; City; State; Zip Code San Angelo, TX 76904	
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	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code San Angelo, TX 76904	
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 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 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 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 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 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 6 Contributor address; City; State; Zip Code Haskell, TX 79521	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Vivian 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 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 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 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 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 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 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 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 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

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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 Obelgoner, James	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Hallettsville, TX 77964	
8 Principal occupation / Job title (See Instructions) Rad Tech		9 Employer (See Instructions) Lavaca Medical Center
Date 08/14/2025	Full name of contributor Odom, Ty	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Austin, TX 78747	
Principal occupation / Job title (See Instructions) Military		Employer (See Instructions) USAF
Date 10/08/2025	Full name of contributor Ohndorf, Hans	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Nacogdoches, TX 75961	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/02/2025	Full name of contributor Papier, Lewis	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code New York, NY 10027	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/07/2025	Full name of contributor Parigi, John S.	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Rockwall, TX 75087	
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: 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	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code Houston, TX 77079	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Wichita Falls, TX 76310-0437	
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	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78731	
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	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Snow Hill, MD 21863	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Cooper, TX 75432	
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	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Aurora, CO 80016	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Brooklyn, NY 11221	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Abilene, TX 79601	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Jefferson, TX 75657	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Jefferson, TX 75657	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Hendrikus Group

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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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Jefferson, TX 75657	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Jefferson, TX 75657	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Jefferson, TX 75657	
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	Amount of Contribution (\$) \$1,836.00
	Contributor address; City; State; Zip Code Jefferson, TX 75657	
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	Amount of Contribution (\$) \$1,836.00
	Contributor address; City; State; Zip Code Jefferson, TX 75657	
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Hendrikus Group

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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 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Nirav	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Jefferson, TX 75657	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code KILLEEN, TX 76542	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code KILLEEN, TX 76542	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code KILLEEN, TX 76542	
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#: _____) Pevhouse, Sarah	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Dripping Springs, TX 78620	
Principal occupation / Job title (See Instructions) 78620		Employer (See Instructions) Apogee Dripping Springs

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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	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Amarillo, TX 79118	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Heath, TX 75032	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Heath, TX 75032	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Heath, TX 75032	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Heath, TX 75032	
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	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Heath, TX 75032	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Heath, TX 75032	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Arlington, TX 76017	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Bridgeport, TX 76426-6844	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Arlington, TX 76017	
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: 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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code HICO, TX 76457	
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	Amount of Contribution (\$) \$364.00
	Contributor address; City; State; Zip Code Van, TX 75790	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Chesapeake, VA 23322	
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	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Austin, TX 78738	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Albany, GA 31707	
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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Lufkin, TX 75901	
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	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Katy, TX 77494	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code McKinney, TX 75071	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Spicewood, TX 78669	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Spring, TX 77386	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

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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 11/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pontillas, Rhonda	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Spring, TX 77386	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Aubrey, TX 76227	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Portie, Lana	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Beaumont, TX 77706	
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	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code Marshall, TX 75672	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Waterford, NY 12188	
Principal occupation / Job title (See Instructions) Electrician		Employer (See Instructions) Tonoga Inc.

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2 FILER NAME Chambers, Peter Constantine (Mr.)		3 Filer ID (Ethics Commission Filers) 00089796
4 Date 12/07/2025	5 Full name of contributor Powers, Melinda	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Argyle, TX 76226	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/07/2025	Full name of contributor Powers, Melinda	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Argyle, TX 76226	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/15/2025	Full name of contributor Pringnitz, Howard	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Temple, TX 76504	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/29/2025	Full name of contributor Pritchard, Craig	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Magnolia, TX 77355	
Principal occupation / Job title (See Instructions) Oil field		Employer (See Instructions) Self
Date 11/01/2025	Full name of contributor Procter, Melissa	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code San Marcos, TX 78666	
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) Self

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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 10/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Procter, Melissa 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 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 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 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 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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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	
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	
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	
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	
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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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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Purmela, TX 76566	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Purmela, TX 76566	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Lakeside, TX 76108	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Lakeside, TX 76108	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Lakeside, TX 76108	
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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Lakeside, TX 76108	
8 Principal occupation / Job title (See Instructions) Real estate		9 Employer (See Instructions) self
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Tommy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Spicewood, TX 78669	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Abilene, TX 79605	
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Regmund, Julie	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Benbrook, TX 76126	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Benbrook, TX 76126	
Principal occupation / Job title (See Instructions) Respiratory Therapist		Employer (See Instructions) Texas Health Resources

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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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Durham, NC 27705	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reis, Ashton	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Austin, TX 78734	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Hereford, AZ 85615	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Bastrop, TX 78602	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Pittsboro, NC 27312	
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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Willis, TX 77378	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Caldwell, TX 77836	
Principal occupation / Job title (See Instructions) retried		Employer (See Instructions)
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, August	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78290	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Fort Valley, VA 22652	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code El paso, TX 79932	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Needville, TX 77461	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Pearland, TX 77581	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Corpus Christi, TX 78418	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Concord, CA 94520	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78132	
Principal occupation / Job title (See Instructions) Shop Tech		Employer (See Instructions) DSG

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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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code POULSBO, WA 98370	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77018	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Salado, TX 76571	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Orange Park, TX 32065	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Conroe, TX 77384-3818	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santana, Jose	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Seminole, FL 33772	
Principal occupation / Job title (See Instructions) Minister & Consultant		Employer (See Instructions) The Great Shalom & Organizational Strategies
Date 08/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarles, Sharon	Amount of Contribution (\$) \$183.60
	Contributor address; City; State; Zip Code Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sartwelle, Glen	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) Minister & Consultant		Employer (See Instructions) The Great Shalom & Organizational Strategies
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sartwelle, Glen	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) Minister & Consultant		Employer (See Instructions) The Great Shalom & Organizational Strategies

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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 11/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saunders, Stacey	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Mineral Wells, TX 76067	
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	Amount of Contribution (\$) \$183.60
	Contributor address; City; State; Zip Code Keller, TX 76248	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Tamaroa, IL 62888	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dickinson, TX 77539	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Kenedale, TX 76060	
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	7 Amount of Contribution (\$) \$7.77
	6 Contributor address; City; State; Zip Code Round Rock, TX 78665	
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	Amount of Contribution (\$) \$183.60
	Contributor address; City; State; Zip Code Prosper, TX 75077	
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	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Prosper, TX 75077	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Fort Worth, TX 76140	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Plano, TX 75075	
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: 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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Plano, TX 75075	
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	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Frisco, TX 75034	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75225	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Odessa, TX 79765	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Portsmouth, VA 23703	
Principal occupation / Job title (See Instructions) Proposal Manager		Employer (See Instructions) Epsilon Systems Solutions

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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	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code San Francisco, CA 94103	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Collinsville, TX 76233	
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	Amount of Contribution (\$) \$108.00
	Contributor address; City; State; Zip Code San Rafael, CA 94915	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Hagerstown, MD 21742	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Pilot Point, TX 76258	
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Pilot Point ISD

MONETARY POLITICAL CONTRIBUTIONS

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 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 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 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 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 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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Conroe, TX 77384	
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	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Grandbury, TX 76049	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Waco, TX 76710	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Bastrop, TX 78602	
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	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Insurance advisor		Employer (See Instructions) biBerk

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/130 Rpt: 114/161
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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code River Oaks, TX 76114	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Cleveland, TX 77327	
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#: _____) Stratton, Jarrod	Amount of Contribution (\$) \$183.60
	Contributor address; City; State; Zip Code Cedar Park, TX 78613	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Gainesville, TX 76240	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Corpus Christi, TX 78414	
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: 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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Corpus Christi, TX 78414	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Corpus Christi, TX 78414	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Lubbock, TX 79424	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Plano, TX 75093	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Plano, TX 75093	
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	7 Amount of Contribution (\$) \$183.60
	6 Contributor address; City; State; Zip Code Wylie, TX 75098	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Fort Worth, TX 76115	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Fort Worth, TX 76115	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Spring Valley, NY 10977	
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	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Spring Valley, NY 10977	
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: 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	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Dauphin Island, AL 36528	
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	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dripping Springs, TX 78620	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Yerington, NV 89447	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Yerington, NV 89447	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Yerington, NV 89447	
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: 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	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Yerington, NV 89447	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teakle, Lori	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Yerington, NV 89447	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Yerington, NV 89447	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77070	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NURSERY, TX 77976	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code SAN ANTONIO, TX 78258	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Spring, TX 77379	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Knoxville, TN 37934	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code New Braunfels, TX 78132	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76109	
Principal occupation / Job title (See Instructions) taking care of my parents		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: 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 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 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 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 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 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

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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	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Grapevine, TX 76051	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Grapevine, TX 76051	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Austin, TX 78729	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Haltom city, TX 76117	
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	Amount of Contribution (\$) \$183.60
	Contributor address; City; State; Zip Code Dallas, TX 75230	
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: 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	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Ridgefield, CT 06877	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Bedford, TX 76021	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Frisco, TX 75036	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code CHAPPELL HILL, TX 77426	
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	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Oakhurst, TX 77359	
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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Kountze, TX 77625	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75230	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Coleman, TX 76834	
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	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Amarillo, TX 79106	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77062	
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	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Bruceville, TX 76630	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Converse, TX 78109	
Principal occupation / Job title (See Instructions) Account Mgrmr		Employer (See Instructions) Walthall; Sachse & Pipes
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiens, Mary	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Houston, TX 77043	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Glen Rose, TX 76043	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Choctaw, OK 73020	
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	7 Amount of Contribution (\$) \$18.36
	6 Contributor address; City; State; Zip Code Boyd, TX 76023	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Marble Falls, TX 78654	
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	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Ft. Worth, TX 76109	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Ft. Worth, TX 76109	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Powderly, TX 75473	
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 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 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 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 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 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) retired		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	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Cypress, TX 77433	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Cypress, TX 77433	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Richardson, TX 75082	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Junction, TX 76849	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Junction, TX 76849	
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 6 Contributor address; City; State; Zip Code Junction, TX 76849	7 Amount of Contribution (\$) \$18.36
	8 Principal occupation / Job title (See Instructions) retired	
Date 09/01/2025	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) Employer (See Instructions)	
Date 07/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zuniga, Noah 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 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)	
Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) frey, laura 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	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Buda, TX 78610	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Poolville, TX 76487	
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	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code LITTLE ELM, TX 75068	
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	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code LITTLE ELM, TX 75068	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code New York, NY 10024	
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	7 Amount of Contribution (\$) \$10,000.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75225	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Cedar Park, TX 78613	
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#: _____) randon, martin	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code CORPUS CHRISTI, TX 78413	
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#: _____) s, Randall	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78130	
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	Amount of Contribution (\$) \$18.36
	Contributor address; City; State; Zip Code Plano, TX 75075	
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 wood, Matthew 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

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/17 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 ONLY 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 ONLY 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/17 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 ONLY 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 ONLY 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/17 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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; 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/01/2025	Payee name CXN Media	
Amount (\$) \$5,000.00	Payee address; City; 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/24/2025	Payee name Cagle Steaks	
Amount (\$) \$524.74	Payee address; City; 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/17 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; 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/07/2025	Payee name Courtyard by Marriott	
Amount (\$) \$250.61	Payee address; City; 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/07/2025	Payee name Courtyard by Marriott	
Amount (\$) \$492.89	Payee address; City; 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/17 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 ONLY 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 ONLY 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/17 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; 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/18/2025	Payee name Horseshoe Ridge	
Amount (\$) \$1,199.00	Payee address; City; 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/08/2025	Payee name La Quinta Motor Inns	
Amount (\$) \$280.60	Payee address; City; 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/17 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/17 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Owens, Carl	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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Owens, Carl	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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Owens, Carl	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/17 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 ONLY 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 ONLY 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/17 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 ONLY 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 ONLY 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 Filing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Sleep Inn	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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Spectrum	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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Spectrum	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/17 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 ONLY 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 ONLY 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/17 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; 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 ONLY 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; 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 ONLY 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; 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/17 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; 5011 Westheimer Rd Houston, TX 77056	State; Zip Code
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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wimberly, Joe	Office sought Office held
Date 10/02/2025	Payee name Wimberly, Joe	
Amount (\$) \$1,755.00	Payee address; City; 180 Joe Wimberley Blvd Wimberley, TX 78676	State; Zip Code
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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wimberly, Joe	Office sought Office held
Date 11/10/2025	Payee name Wimberly, Joe	
Amount (\$) \$1,755.00	Payee address; City; 180 Joe Wimberley Blvd Wimberley, TX 78676	State; Zip Code
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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wimberly, Joe	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/17 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wimberly, Joe	Office sought Office held
Date 12/31/2025	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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wimberly, Joe	Office sought Office held
Date 08/15/2025	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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Wimberly, Joe	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/17 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 ONLY 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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held