

**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) 00067957	2 Total pages filed: 24		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST The Honorable Nicole D.	MI	<b>OFFICE USE ONLY</b>		
	NICKNAME	LAST Collier	SUFFIX	Date Received ELECTRONICALLY FILED 01/16/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 24241  Fort Worth, TX 76124			Date Hand-delivered or Date Postmarked		
				Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Mr.	MI			
	NICKNAME	LAST Collier	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); PO Box 24241  Fort Worth, TX 76124		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION (817) 330-9504					
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 09/05/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any) State Representative District 95 Tarrant			12 OFFICE SOUGHT (if known) State Representative District 95		

**GO TO PAGE 2**

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

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

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13 C / OH NAME	Collier, Nicole D. (The Honorable)		14 Filer ID (Ethics Commission Filers) 00067957
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)		\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 4,208.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>		\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 40,705.92
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.

The Honorable Nicole D. Collier

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

AFFIX NOTARY STAMP / SEAL ABOVE

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

\_\_\_\_\_  
Signature of officer administering

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

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

## **SUBTOTALS - C/OH**

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

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<b>18 FILER NAME</b> Collier, Nicole D. (The Honorable)		<b>19 Filer ID</b> (Ethics Commission Filers) 00067957
<b>20 SCHEDULE SUBTOTALS</b>		
NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,883.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 325.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/20 Rpt: 4/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 11/16/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Frederick	<b>7</b> Amount of Contribution (\$) \$25.00
	<b>6</b> Contributor address; City; State; Zip Code  Soldotna, AK 90669	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) FAA
<b>Date</b> 09/21/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Susan	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  Daly City, CA 94015	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 10/26/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Susan	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  Daly City, CA 94015	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 11/23/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Susan	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  Daly City, CA 94015	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 12/21/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Susan	<b>Amount of Contribution (\$)</b> \$20.00
	<b>Contributor address; City; State; Zip Code</b>  Daly City, CA 94015	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/20 Rpt: 5/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 11/02/2025	<b>5</b> Full name of contributor Black, Linda	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Woodbine, MD 21797	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) CPB
<b>Date</b> 09/28/2025	<b>Full name of contributor</b> Bogart, Billie	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Contributor address; City; State; Zip Code</b>  Austin, TX 78729	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 09/28/2025	<b>Full name of contributor</b> Campbell, Therese	<b>Amount of Contribution (\$)</b> \$2.00
	<b>Contributor address; City; State; Zip Code</b>  Las Vegas, NV 89147	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 10/26/2025	<b>Full name of contributor</b> Campbell, Therese	<b>Amount of Contribution (\$)</b> \$2.00
	<b>Contributor address; City; State; Zip Code</b>  Las Vegas, NV 89147	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 11/30/2025	<b>Full name of contributor</b> Campbell, Therese	<b>Amount of Contribution (\$)</b> \$2.00
	<b>Contributor address; City; State; Zip Code</b>  Las Vegas, NV 89147	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/20 Rpt: 6/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 12/28/2025	<b>5</b> Full name of contributor Campbell, Therese	<b>7</b> Amount of Contribution (\$) \$2.00
	<b>6</b> Contributor address; City; State; Zip Code  Las Vegas, NV 89147	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) Not Employed
Date 10/26/2025	Full name of contributor Clark, Terry	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Columbus, IN 47203	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 09/21/2025	Full name of contributor Coffey, Megan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  COTATI, CA 94931	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) The Princeton Review
Date 10/19/2025	Full name of contributor Coffey, Megan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  COTATI, CA 94931	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) The Princeton Review
Date 11/23/2025	Full name of contributor Coffey, Megan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  COTATI, CA 94931	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) The Princeton Review

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/20 Rpt: 7/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 12/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffey, Megan  <b>6</b> Contributor address; City; State; Zip Code  COTATI, CA 94931	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) 		<b>9</b> Employer (See Instructions) The Princeton Review
Date 10/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Sophia  Contributor address; City; State; Zip Code  Sausalito, CA 94965	Amount of Contribution (\$) \$438.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 12/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Sophia  Contributor address; City; State; Zip Code  Sausalito, CA 94965	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 09/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Ian  Contributor address; City; State; Zip Code  Bedford, TX 76022	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Ezlynx
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dayton-Kistler, Katherine  Contributor address; City; State; Zip Code  South jordan, UT 84009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/20 Rpt: 8/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 10/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dayton-Kistler, Katherine ..... <b>6</b> Contributor address; City; State; Zip Code  South jordan, UT 84009	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>8</b> Principal occupation / Job title (See Instructions)  Not Employed	<b>9</b> Employer (See Instructions) Not Employed
<b>Date</b> 11/30/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Dayton-Kistler, Katherine ..... <b>Contributor address; City; State; Zip Code</b>  South jordan, UT 84009	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Principal occupation / Job title (See Instructions)</b>  Not Employed	<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 12/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Dayton-Kistler, Katherine ..... <b>Contributor address; City; State; Zip Code</b>  South jordan, UT 84009	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Principal occupation / Job title (See Instructions)</b>  Not Employed	<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 09/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Erman, Robert ..... <b>Contributor address; City; State; Zip Code</b>  Bridgeport, CT 06604	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Principal occupation / Job title (See Instructions)</b>  Not Employed	<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 10/26/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Erman, Robert ..... <b>Contributor address; City; State; Zip Code</b>  Bridgeport, CT 06604	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Principal occupation / Job title (See Instructions)</b>  Not Employed	<b>Employer (See Instructions)</b> Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/20 Rpt: 9/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 11/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erman, Robert	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Bridgeport, CT 06604	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) Not Employed
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erman, Robert	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Bridgeport, CT 06604	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eyler, Alan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Houston, TX 77009	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 10/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eyler, Alan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Houston, TX 77009	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eyler, Alan	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Houston, TX 77009	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/20 Rpt: 10/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 09/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeburn, Margaret	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Gaithersburg, MD 20878	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) DHS
<b>Date</b> 10/05/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Dan	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b>  San Mateo, CA 94402	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 09/21/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) GRADY, S R	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Contributor address; City; State; Zip Code</b>  OKEMOS, MI 48864	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Self
<b>Date</b> 10/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) GRADY, S R	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Contributor address; City; State; Zip Code</b>  OKEMOS, MI 48864	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Self
<b>Date</b> 11/23/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) GRADY, S R	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Contributor address; City; State; Zip Code</b>  OKEMOS, MI 48864	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Self

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/20 Rpt: 11/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 12/21/2025	<b>5</b> Full name of contributor GRADY, S R	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  OKEMOS, MI 48864	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) Self
Date 09/21/2025	Full name of contributor Gaffney, Patricia	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  San Antonio, TX 78258	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 09/21/2025	Full name of contributor Garcia, Liza	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Lynn, MA 01902	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 10/19/2025	Full name of contributor Garcia, Liza	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Lynn, MA 01902	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 11/23/2025	Full name of contributor Garcia, Liza	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Lynn, MA 01902	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/20 Rpt: 12/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 12/21/2025	<b>5</b> Full name of contributor Garcia, Liza	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  Lynn, MA 01902	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) Not Employed
Date 09/07/2025	Full name of contributor Garza, Amy	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code  Bay city, TX 77414	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 09/21/2025	Full name of contributor Geisler, Susan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Sacramento, CA 95833	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 10/19/2025	Full name of contributor Geisler, Susan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Sacramento, CA 95833	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 11/23/2025	Full name of contributor Geisler, Susan	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Sacramento, CA 95833	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/20 Rpt: 13/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 12/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geisler, Susan ..... <b>6</b> Contributor address; City; State; Zip Code  Sacramento, CA 95833	<b>7</b> Amount of Contribution (\$) \$5.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) Not Employed
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geselman, John ..... Contributor address; City; State; Zip Code  Muir, MI 48860	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Army
Date 10/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geselman, John ..... Contributor address; City; State; Zip Code  Muir, MI 48860	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Army
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geselman, John ..... Contributor address; City; State; Zip Code  Muir, MI 48860	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Army
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geselman, John ..... Contributor address; City; State; Zip Code  Muir, MI 48860	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Army

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/20 Rpt: 14/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 09/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Bonnie	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Washington, DC 20002	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) UN
<b>Date</b> 10/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Bonnie	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Contributor address; City; State; Zip Code</b>  Washington, DC 20002	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> UN
<b>Date</b> 11/23/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Bonnie	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Contributor address; City; State; Zip Code</b>  Washington, DC 20002	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> UN
<b>Date</b> 12/21/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Bonnie	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Contributor address; City; State; Zip Code</b>  Washington, DC 20002	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> UN
<b>Date</b> 11/30/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes, Cindy	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  Le Roy, NY 14482	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/20 Rpt: 15/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 09/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Heather	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  Richardson, TX 75082	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) Lifepoint
<b>Date</b> 10/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Heather	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  Richardson, TX 75082	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Lifepoint
<b>Date</b> 11/23/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Heather	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Contributor address; City; State; Zip Code</b>  Richardson, TX 75082	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Lifepoint
<b>Date</b> 12/21/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Heather	<b>Amount of Contribution (\$)</b> \$5.00
	<b>Contributor address; City; State; Zip Code</b>  Richardson, TX 75082	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Lifepoint
<b>Date</b> 09/21/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Kurokawa, Zen	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  Sarasota, FL 34231	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Not employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/20 Rpt: 16/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 10/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kurokawa, Zen	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  Sarasota, FL 34231	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) Not employed
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kurokawa, Zen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Sarasota, FL 34231	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not employed
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kurokawa, Zen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Sarasota, FL 34231	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not employed
Date 09/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, Laurin	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Livingston, TX 77399	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 10/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, Laurin	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Livingston, TX 77399	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/20 Rpt: 17/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 11/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, Laurin	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Livingston, TX 77399	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) Not Employed
<b>Date</b> 12/28/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlow, Laurin	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Livingston, TX 77399	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 09/21/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Linnea	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  Denison, TX 75020	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Pieology
<b>Date</b> 10/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Linnea	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  Denison, TX 75020	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Pieology
<b>Date</b> 11/23/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Linnea	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  Denison, TX 75020	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Pieology

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/20 Rpt: 18/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 12/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Linnea	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  Denison, TX 75020	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) Pieology
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noble-Power, Christine	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code  Aurora, CO 80019	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) CommonSpirit health
Date 10/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noble-Power, Christine	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code  Aurora, CO 80019	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) CommonSpirit health
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noble-Power, Christine	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  Aurora, CO 80019	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) CommonSpirit health
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OSullivan, Virginia	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Hempstead, NY 11550	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/20 Rpt: 19/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 10/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oremland, Bradley	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  Rockville, MD 20850	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) Not Employed
Date 10/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrander, Peggy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Plano, TX 75093	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Institute of Health Promotion
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Kymberlyn	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code  Los Angeles, CA 90047	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 12/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Katherine	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Sausalito, CA 94965	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Thomas	Amount of Contribution (\$) \$6.00
	Contributor address; City; State; Zip Code  dayton, OH 45406	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/20 Rpt: 20/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 10/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Thomas ..... <b>6</b> Contributor address; City; State; Zip Code  dayton, OH 45406	<b>7</b> Amount of Contribution (\$) \$6.00
	<b>8</b> Principal occupation / Job title (See Instructions)  Not Employed	<b>9</b> Employer (See Instructions) Not Employed
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Thomas ..... Contributor address; City; State; Zip Code  dayton, OH 45406	Amount of Contribution (\$) \$6.00
	Principal occupation / Job title (See Instructions)  Not Employed	Employer (See Instructions) Not Employed
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Thomas ..... Contributor address; City; State; Zip Code  dayton, OH 45406	Amount of Contribution (\$) \$6.00
	Principal occupation / Job title (See Instructions)  Not Employed	Employer (See Instructions) Not Employed
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Celia ..... Contributor address; City; State; Zip Code  Wilmington, NC 28403	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions)  Not Employed	Employer (See Instructions) Not Employed
Date 11/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sojka, Ellen ..... Contributor address; City; State; Zip Code  Luquillo, TX 00773	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions)  Not Employed	Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/20 Rpt: 21/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 09/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sydney, David	<b>7</b> Amount of Contribution (\$) \$10.00
	<b>6</b> Contributor address; City; State; Zip Code  Rochester, NY 14616	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) Infosys
<b>Date</b> 10/19/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sydney, David	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  Rochester, NY 14616	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Infosys
<b>Date</b> 11/23/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sydney, David	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  Rochester, NY 14616	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Infosys
<b>Date</b> 12/21/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sydney, David	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  Rochester, NY 14616	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> Infosys
<b>Date</b> 10/12/2025	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Tamez, Sonia	<b>Amount of Contribution (\$)</b> \$10.00
	<b>Contributor address; City; State; Zip Code</b>  Austin, TX 78725	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b> State of Texas

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/20 Rpt: 22/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 10/26/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tornheim, Bobbi	<b>7</b> Amount of Contribution (\$) \$15.00
	<b>6</b> Contributor address; City; State; Zip Code  Bedford, MA 01730	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) self
Date 10/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vallot, Colette	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Houston, TX 77025	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Self
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Samantha	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code  Wichita, KS 67212	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 10/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willis, Mitzi S	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Flower Mound, TX 75022	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Self
Date 10/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willoughby, Joyce	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Arlington, VA 22204	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) EEOC

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/20 Rpt: 23/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> Date 09/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yoo, Florence  <b>6</b> Contributor address; City; State; Zip Code  Evanston, IL 60203	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions) MedTec
Date 12/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) hendricks, chase  Contributor address; City; State; Zip Code  Pflugerville, TX 78660	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) City
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) johnson, mark  Contributor address; City; State; Zip Code  Plano, TX 75074	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Toyota
Date 10/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) johnson, mark  Contributor address; City; State; Zip Code  Plano, TX 75074	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Toyota
Date 11/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) johnson, mark  Contributor address; City; State; Zip Code  Plano, TX 75074	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Toyota

**NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS****SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 1/1 Rpt: 24/24
<b>2</b> FILER NAME Collier, Nicole D. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067957
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
<b>5</b> Date 10/10/2025	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackridge ..... <b>7</b> Contributor address; City; State; Zip Code  Austin, TX 78701	<b>8</b> Amount of contribution (\$) <b>9</b> In-kind contribution description \$325.00 Email Communication fee for Fundraiser  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		