GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers): 00018807

2 Total pages filed: 85

3 COMMITTEE NAME
State COPE Fund

OFFICE USE ONLY

Date Received
ELECTRONICALLY FILED
02/23/2026

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

4 COMMITTEE ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
P. O. Box 12727
Austin, TX 78711

5 CAMPAIGN TREASURER NAME

MS / MRS / MR: Mr.
FIRST: Leonard
MI:
NICKNAME:
LAST: Aguilar
SUFFIX:

6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
1106 Lavaca
Ste. 200
Austin, TX 78701

7 CAMPAIGN TREASURER MAILING ADDRESS

☐ Change of Address

STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
P.O. Box 12727
Austin, TX 78711

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 477-6195

9 REPORT TYPE

☐ January 15
☐ July 15
☐ 30th day before election
☒ 8th day before election
☐ Runoff
☐ Dissolution (Attach PAC-DR)
☐ 10th day after campaign treasurer termination

10 PERIOD COVERED

Month Day Year: 01/01/2026
THROUGH
Month Day Year: 02/21/2026

11 ELECTION

ELECTION DATE
Month Day Year: 03/03/2026

ELECTION TYPE
☒ Primary
☐ Runoff
☐ Other
☐ General
☐ Special

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC
COVER SHEET PG 2

12 COMMITTEE NAME State COPE Fund	**13** Filer ID (Ethics Commission Filers) 00018807

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported: Chris Turner State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) ☐ check here if this report qualifies for the higher itemization threshold	$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 16,245.76
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	$ 24,738.22
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 56,055.92
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

16 AFFIDAVIT

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

Mr. Leonard Aguilar
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

12 COMMITTEE NAME	**13** Filer ID (Ethics Commission Filers)
State COPE Fund	00018807

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mary Ann Perez State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Venton Jones State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Gina Hinojosa Governor
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

12 COMMITTEE NAME	**13** Filer ID (Ethics Commission Filers)
State COPE Fund	00018807

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Marcos Velez Lieutenant Governor
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Nathan Johnson Attorney General
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Sarah Eckhardt Comptroller
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

12 COMMITTEE NAME	**13** Filer ID (Ethics Commission Filers)
State COPE Fund	00018807

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jose Loya Land Commissioner
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Eliz Markowitz State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ron Reynolds State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

12 COMMITTEE NAME	**13** Filer ID (Ethics Commission Filers)
State COPE Fund	00018807

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Sandy Ibanez State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Pooja Sethi State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Montserrat Garibay State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

12 COMMITTEE NAME	**13** Filer ID (Ethics Commission Filers)
State COPE Fund	00018807

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jeremy Hendricks State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ashley Thornton State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mary Wells State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

12 COMMITTEE NAME	**13** Filer ID (Ethics Commission Filers)
State COPE Fund	00018807

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Christie Wood State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Suleman Lalani State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Diane Symons State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

12 COMMITTEE NAME	**13** Filer ID (Ethics Commission Filers)
State COPE Fund	00018807

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Robert Minhara State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ryan Ayala State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jordan Brown State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

12 COMMITTEE NAME	**13** Filer ID (Ethics Commission Filers)
State COPE Fund	00018807

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Adrian Reyna State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Brett Robinson State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Lawrence Allen, Jr. State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

12 COMMITTEE NAME	**13** Filer ID (Ethics Commission Filers)
State COPE Fund	00018807

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Charlene Johnson State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Armando Walle State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Danny Norris State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

12 COMMITTEE NAME	**13** Filer ID (Ethics Commission Filers)
State COPE Fund	00018807

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Darlene Breaux State Representative
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

SUBTOTALS - GPAC

FORM GPAC
COVER SHEET PG 3

17 COMMITTEE NAME	18 Filer ID (Ethics Commission Filers)
State COPE Fund	00018807

19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 15,981.66
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS	$
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	$
7.	X	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	$ 264.10
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
9.		SCHEDULE E: LOANS	$
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$ 24,738.22
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	$
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$
15.		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: 1/59 Rpt: 14/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
01/09/2026	Aguilar, Belinda Houston, TX 77013	$20.00

8 Principal occupation / Job title (See Instructions): Sales

9 Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/09/2026	Aguilar, Belinda Houston, TX 77013	$20.00

Principal occupation / Job title (See Instructions): Sales

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/06/2026	Aguilar, Leonard San Marcos, TX 78666	$40.00

Principal occupation / Job title (See Instructions): Union Officer

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/13/2026	Aguilar, Leonard San Marcos, TX 78666	$40.00

Principal occupation / Job title (See Instructions): Union Officer

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/13/2026	Aguirre, Armando Channelview, TX 77530	$20.00

Principal occupation / Job title (See Instructions): Union Manager

Employer (See Instructions):

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 2/59 Rpt: 15/85

2 FILER NAME
State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/06/2026	Amps, Emily 6 Contributor address; City; State; Zip Code Buda, TX 78610	$40.00
8 Principal occupation / Job title (See Instructions) Director	9 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/13/2026	Amps, Emily Contributor address; City; State; Zip Code Buda, TX 78610	$40.00
Principal occupation / Job title (See Instructions) Director	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Anderson, Jackie Contributor address; City; State; Zip Code Houston, TX 77078	$20.00
Principal occupation / Job title (See Instructions) Union Officer	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Anderson, Jackie Contributor address; City; State; Zip Code Houston, TX 77078	$20.00
Principal occupation / Job title (See Instructions) Union Officer	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Armstrong, William Contributor address; City; State; Zip Code Spring Branch, TX 78070	$10.00
Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 3/59 Rpt: 16/85

2 FILER NAME
State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
02/09/2026	Armstrong, William 6 Contributor address; City; State; Zip Code Spring Branch, TX 78070	$10.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/06/2026	Barreto, Fabiola Contributor address; City; State; Zip Code Austin, TX 78745	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Project Coordinator	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/13/2026	Barreto, Fabiola Contributor address; City; State; Zip Code Austin, TX 78745	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Project Coordinator	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/30/2026	Barton Jr., James Contributor address; City; State; Zip Code Orange, TX 77630	$250.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Steelworker	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/30/2026	Beuerlein, Joe Contributor address; City; State; Zip Code West, TX 76691	$250.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Mechanic	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 4/59 Rpt: 17/85

2 FILER NAME
State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
01/09/2026	Bocanegra, Andres Pharr, TX 78577	$20.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Teacher	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/09/2026	Bocanegra, Andres Pharr, TX 78577	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Teacher	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/29/2026	Brenneman, Ben Austin, TX 78759	$250.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Electrician	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Brisker, Calvin Houston, TX 77093	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Electrician	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/10/2026	Brisker, Calvin Houston, TX 77093	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Electrician	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 5/59 Rpt: 18/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/09/2026	Bryant, Judy 6 Contributor address; City; State; Zip Code Dallas, TX 75231	$10.00
8 Principal occupation / Job title (See Instructions): Retired	9 Employer (See Instructions):	
Date: 01/29/2026	Full name of contributor ☐ out-of-state PAC (ID#:_____) Bryant, Judy Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution ($): $100.00
Principal occupation / Job title (See Instructions): Retired	Employer (See Instructions):	
Date: 02/10/2026	Full name of contributor ☐ out-of-state PAC (ID#:_____) Bryant, Judy Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution ($): $10.00
Principal occupation / Job title (See Instructions): Retired	Employer (See Instructions):	
Date: 01/21/2026	Full name of contributor ☐ out-of-state PAC (ID#:_____) Buresh, Gary Contributor address; City; State; Zip Code Cleburne, TX 76031	Amount of Contribution ($): $250.00
Principal occupation / Job title (See Instructions): International Rep	Employer (See Instructions):	
Date: 01/27/2026	Full name of contributor ☐ out-of-state PAC (ID#:_____) Capo, Zeph Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution ($): $250.00
Principal occupation / Job title (See Instructions): Union Officer	Employer (See Instructions):	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
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00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
02/13/2026	Carrillo-Valdez, Lydia 6 Contributor address; City; State; Zip Code San Antonio, TX 78240	$10.00

8 Principal occupation / Job title (See Instructions)
Organizer

9 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Cash, Bob Contributor address; City; State; Zip Code Austin, TX 78754-5738	$20.00

Principal occupation / Job title (See Instructions)
Director

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Cash, Bob Contributor address; City; State; Zip Code Austin, TX 78754-5738	$20.00

Principal occupation / Job title (See Instructions)
Director

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/13/2026	Castillo, Lawrence Contributor address; City; State; Zip Code Lipan, TX 76462	$20.00

Principal occupation / Job title (See Instructions)
Coordinator

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/13/2026	Castro, Laura Contributor address; City; State; Zip Code Waco, TX 76702	$250.00

Principal occupation / Job title (See Instructions)
Clerk

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 7/59 Rpt: 20/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
01/28/2026	Chamberlain, Larry Midlothian, TX 76065	$250.00
8 Principal occupation / Job title (See Instructions)	**9 Employer (See Instructions)**	
International Rep		

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/29/2026	Chenevert, Tony DeSoto, TX 75115-3487	$100.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Retired		

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/30/2026	Cole, Bobby Como, TX 75431	$100.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Retired		

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/29/2026	Comeaux, Bob San Antonio, TX 78232-4948	$100.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Retired		

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Cooper, Justin Port Arthur, TX 77640	$20.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Union Officer		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
02/09/2026	Cooper, Justin 6 Contributor address; City; State; Zip Code Port Arthur, TX 77640	$20.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Union Officer	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/06/2026	Corona, Jesus Contributor address; City; State; Zip Code Austin, TX 78754	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Digital Organizer	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/13/2026	Corona, Jesus Contributor address; City; State; Zip Code Austin, TX 78754	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Digital Organizer	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Crandell, Mark Contributor address; City; State; Zip Code League City, TX 77573	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Administrator	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Crandell, Mark Contributor address; City; State; Zip Code League City, TX 77573	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Administrator	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 9/59 Rpt: 22/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
01/09/2026	Critendon, Taylor Austin, TX 78704	$20.00
8 Principal occupation / Job title (See Instructions)	**9 Employer (See Instructions)**	
Nurse		

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/09/2026	Critendon, Taylor Austin, TX 78704	$20.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Nurse		

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Cummins, Thomas San Antonio, TX 78249	$25.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Teacher		

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/09/2026	Cummins, Thomas San Antonio, TX 78249	$25.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Teacher		

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Cunningham, Michael Huntsville, TX 77320	$20.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Retired		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 10/59 Rpt: 23/85

2 FILER NAME
State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
02/10/2026	Cunningham, Michael 6 Contributor address; City; State; Zip Code Huntsville, TX 77320	$20.00

8 Principal occupation / Job title (See Instructions)
Retired

9 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/27/2026	Curry, Clyff Contributor address; City; State; Zip Code Kosse, TX 76653-0082	$250.00

Principal occupation / Job title (See Instructions)
Business Manager

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/21/2026	Curts, Rosemary Contributor address; City; State; Zip Code Dallas, TX 75211	$250.00

Principal occupation / Job title (See Instructions)
Teacher

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/28/2026	Darby, Jeff Contributor address; City; State; Zip Code Nederland, TX 77627	$100.00

Principal occupation / Job title (See Instructions)
Mayor

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Del Rio, Alicia Contributor address; City; State; Zip Code Austin, TX 78749	$20.00

Principal occupation / Job title (See Instructions)
District Director

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 11/59 Rpt: 24/85

2 FILER NAME
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3 Filer ID (Ethics Commission Filers)
00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
02/10/2026	Del Rio, Alicia 6 Contributor address; City; State; Zip Code Austin, TX 78749	$20.00
8 Principal occupation / Job title (See Instructions) District Director	9 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/28/2026	Delp, Bo Contributor address; City; State; Zip Code Austin, TX 78723	$50.00
Principal occupation / Job title (See Instructions) Executive Director	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/29/2026	Dent, Harmon Contributor address; City; State; Zip Code Beaumont, TX 77707	$100.00
Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Dewey, Andy Contributor address; City; State; Zip Code Houston, TX 77071	$20.00
Principal occupation / Job title (See Instructions) Business Manager	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Dewey, Andy Contributor address; City; State; Zip Code Houston, TX 77071	$20.00
Principal occupation / Job title (See Instructions) Business Manager	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 12/59 Rpt: 25/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/09/2026	Diegel, Rick 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78415	$20.00
8 Principal occupation / Job title (See Instructions): Retired	9 Employer (See Instructions):	
Date: 02/10/2026	Full name of contributor: Diegel, Rick ☐ out-of-state PAC (ID#:_____) Contributor address; City; State; Zip Code Corpus Christi, TX 78415	Amount of Contribution ($): $20.00
Principal occupation / Job title (See Instructions): Retired	Employer (See Instructions):	
Date: 01/09/2026	Full name of contributor: Drayden, Jerrick ☐ out-of-state PAC (ID#:_____) Contributor address; City; State; Zip Code Kennedale, TX 76060	Amount of Contribution ($): $20.00
Principal occupation / Job title (See Instructions): Maintenance	Employer (See Instructions):	
Date: 02/10/2026	Full name of contributor: Drayden, Jerrick ☐ out-of-state PAC (ID#:_____) Contributor address; City; State; Zip Code Kennedale, TX 76060	Amount of Contribution ($): $20.00
Principal occupation / Job title (See Instructions): Maintenance	Employer (See Instructions):	
Date: 01/09/2026	Full name of contributor: Dunlap, Traci ☐ out-of-state PAC (ID#:_____) Contributor address; City; State; Zip Code Austin, TX 78744	Amount of Contribution ($): $20.00
Principal occupation / Job title (See Instructions): Teacher	Employer (See Instructions):	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 13/59 Rpt: 26/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
02/10/2026	Dunlap, Traci Austin, TX 78744	$20.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Teacher	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Edge, Don San Antonio, TX 78260	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/10/2026	Edge, Don San Antonio, TX 78260	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Eliano, Cheryl Killeen, TX 76542	$40.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
National VP	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/10/2026	Eliano, Cheryl Killeen, TX 76542	$40.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
National VP	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 14/59 Rpt: 27/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
01/09/2026	Embree, Alice Austin, TX 78722	$10.00
8 Principal occupation / Job title (See Instructions): Retired	9 Employer (See Instructions):	
02/09/2026	Embree, Alice Austin, TX 78722	$10.00
Principal occupation / Job title (See Instructions): Retired	Employer (See Instructions):	
01/09/2026	Ewig, Mark Denison, TX 75020	$10.00
Principal occupation / Job title (See Instructions): Communications	Employer (See Instructions):	
02/10/2026	Ewig, Mark Denison, TX 75020	$10.00
Principal occupation / Job title (See Instructions): Communications	Employer (See Instructions):	
02/10/2026	Faulk, Shannon San Antonio, TX 78201	$20.00
Principal occupation / Job title (See Instructions): Organizer	Employer (See Instructions):	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1:
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4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
02/13/2026	Fernandes, Nathan 6 Contributor address; City; State; Zip Code Austin, TX 78744	$20.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Planner	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/06/2026	Forbes, Lee Contributor address; City; State; Zip Code Austin, TX 78754	$40.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Director	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/13/2026	Forbes, Lee Contributor address; City; State; Zip Code Austin, TX 78754	$40.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Director	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Fuentes, Charles Contributor address; City; State; Zip Code San Antonio, TX 78264	$40.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Legislative Director	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Fuentes, Charles Contributor address; City; State; Zip Code San Antonio, TX 78264	$40.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Legislative Director	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/09/2026	Gardner, John 6 Contributor address; City; State; Zip Code Arlington, TX 76012	$20.00
8 Principal occupation / Job title (See Instructions) Fleet Service Clerk	9 Employer (See Instructions)	
Date 02/10/2026	Full name of contributor ☐ out-of-state PAC (ID#:_____) Gardner, John Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution ($) $20.00
Principal occupation / Job title (See Instructions) Fleet Service Clerk	Employer (See Instructions)	
Date 01/09/2026	Full name of contributor ☐ out-of-state PAC (ID#:_____) Garza, Ruben Contributor address; City; State; Zip Code Rotan, TX 79546	Amount of Contribution ($) $10.00
Principal occupation / Job title (See Instructions) District Director	Employer (See Instructions)	
Date 02/09/2026	Full name of contributor ☐ out-of-state PAC (ID#:_____) Garza, Ruben Contributor address; City; State; Zip Code Rotan, TX 79546	Amount of Contribution ($) $10.00
Principal occupation / Job title (See Instructions) District Director	Employer (See Instructions)	
Date 02/13/2026	Full name of contributor ☐ out-of-state PAC (ID#:_____) Gayler, Jason Contributor address; City; State; Zip Code Alvord, TX 76225	Amount of Contribution ($) $40.00
Principal occupation / Job title (See Instructions) Inspector	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
02/09/2026	Gentry, Suzan 6 Contributor address; City; State; Zip Code Odessa, TX 79762	$100.00

8 Principal occupation / Job title (See Instructions): Retired

9 Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Golden, Brian Contributor address; City; State; Zip Code Arlington, TX 76012	$20.00

Principal occupation / Job title (See Instructions): Aircraft Maintenance

Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Golden, Brian Contributor address; City; State; Zip Code Arlington, TX 76012	$20.00

Principal occupation / Job title (See Instructions): Aircraft Maintenance

Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/29/2026	Gonzales, David Contributor address; City; State; Zip Code Port Neches, TX 77651	$250.00

Principal occupation / Job title (See Instructions): Electrician

Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/13/2026	Gonzales, Matthew Contributor address; City; State; Zip Code Elgin, TX 78621	$20.00

Principal occupation / Job title (See Instructions): Business Manager

Employer (See Instructions):

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
01/06/2026	Gonzalez, Ana Austin, TX 78723	$40.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Director	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/13/2026	Gonzalez, Ana Austin, TX 78723	$40.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Director	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/17/2026	Gonzalez, Monica Bertram, TX 78605	$40.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Nurse	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Gould, Michael Missouri City, TX 77459	$10.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/09/2026	Gould, Michael Missouri City, TX 77459	$10.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
02/13/2026	Grady, Mark 6 Contributor address; City; State; Zip Code Humble, TX 77346	$20.00
8 Principal occupation / Job title (See Instructions) Business Rep.	9 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/13/2026	Gross, Bryan Contributor address; City; State; Zip Code Orange, TX 77630	$20.00
Principal occupation / Job title (See Instructions) Staff Rep	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Grounds, Barry Contributor address; City; State; Zip Code La Porte, TX 77571	$20.00
Principal occupation / Job title (See Instructions) Head Cable Splicer	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Grounds, Barry Contributor address; City; State; Zip Code La Porte, TX 77571	$20.00
Principal occupation / Job title (See Instructions) Head Cable Splicer	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/28/2026	Groves, Mary Contributor address; City; State; Zip Code Pearland, TX 77584	$100.00
Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
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4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/06/2026	Guild, Lauren 6 Contributor address; City; State; Zip Code Austin, TX 78722	$20.00
8 Principal occupation / Job title (See Instructions) Lead Field Organizer	9 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/13/2026	Guild, Lauren Contributor address; City; State; Zip Code Austin, TX 78722	$20.00
Principal occupation / Job title (See Instructions) Lead Field Organizer	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Hammes, Patrick Contributor address; City; State; Zip Code Brownsville, TX 78521	$10.00
Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/09/2026	Hammes, Patrick Contributor address; City; State; Zip Code Brownsville, TX 78521	$10.00
Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/13/2026	Hendricks, Jeremy Contributor address; City; State; Zip Code Austin, TX 78753	$20.00
Principal occupation / Job title (See Instructions) Union Official	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1:
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4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/29/2026	Hernandez, Jennifer 6 Contributor address; City; State; Zip Code Humble, TX 77396	$250.00
8 Principal occupation / Job title (See Instructions) Political Director	9 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/13/2026	Hill, Shayla Contributor address; City; State; Zip Code Arlington, TX 76014	$20.00
Principal occupation / Job title (See Instructions) Letter Carrier	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Hill, Shayla Contributor address; City; State; Zip Code Arlington, TX 76014	$20.00
Principal occupation / Job title (See Instructions) Letter Carrier	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Hinojosa, Mike Contributor address; City; State; Zip Code Aubrey, TX 76227	$10.00
Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Hinojosa, Mike Contributor address; City; State; Zip Code Aubrey, TX 76227	$10.00
Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 22/59 Rpt: 35/85

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00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/09/2026	House, Tina 6 Contributor address; City; State; Zip Code Beaumont, TX 77725	$40.00
8 Principal occupation / Job title (See Instructions) National Organizer	9 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/09/2026	House, Tina Contributor address; City; State; Zip Code Beaumont, TX 77725	$40.00
Principal occupation / Job title (See Instructions) National Organizer	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Hutchinson, Seth Contributor address; City; State; Zip Code Austin, TX 78758	$20.00
Principal occupation / Job title (See Instructions) Organizing Coordinator	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/09/2026	Hutchinson, Seth Contributor address; City; State; Zip Code Austin, TX 78758	$20.00
Principal occupation / Job title (See Instructions) Organizing Coordinator	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/29/2026	Huyck, Scott Contributor address; City; State; Zip Code Waxahachie, TX 75165	$250.00
Principal occupation / Job title (See Instructions) Electrician	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 23/59 Rpt: 36/85

2 FILER NAME
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3 Filer ID (Ethics Commission Filers)
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4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/09/2026	James, Amethyst 6 Contributor address; City; State; Zip Code Houston, TX 77042	$20.00
8 Principal occupation / Job title (See Instructions) 311 Telecommunicator III	9 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	James, Amethyst Contributor address; City; State; Zip Code Houston, TX 77042	$20.00
Principal occupation / Job title (See Instructions) 311 Telecommunicator III	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Javior, Paul Contributor address; City; State; Zip Code Adkins, TX 78101	$8.33
Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Javior, Paul B. Contributor address; City; State; Zip Code Adkins, TX 78101	$8.33
Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/06/2026	Jimenez Jr., Jose Contributor address; City; State; Zip Code Rio Hondo, TX 78583	$20.00
Principal occupation / Job title (See Instructions) Field Organizer	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 24/59 Rpt: 37/85

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State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
02/13/2026	Jimenez Jr., Jose Rio Hondo, TX 78583	$20.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Field Organizer	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Johnson, Willie Waco, TX 76710	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Letter Carrier	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/10/2026	Johnson, Willie Waco, TX 76710	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Letter Carrier	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/06/2026	Jones, Amber Austin, TX 78747	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Policy Associate	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/13/2026	Jones, Amber Austin, TX 78747	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Policy Associate	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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State COPE Fund

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00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/09/2026	Jones, Thomas 6 Contributor address; City; State; Zip Code Austin, TX 78741	$20.00
8 Principal occupation / Job title (See Instructions): Organizer	9 Employer (See Instructions):	
Date: 02/09/2026	Full name of contributor: Jones, Thomas Contributor address; City; State; Zip Code: Austin, TX 78741	Amount of Contribution ($): $20.00
Principal occupation / Job title (See Instructions): Organizer	Employer (See Instructions):	
Date: 01/09/2026	Full name of contributor: Kelley, Annette Contributor address; City; State; Zip Code: Missouri City, TX 77489	Amount of Contribution ($): $20.00
Principal occupation / Job title (See Instructions): Clerk	Employer (See Instructions):	
Date: 02/10/2026	Full name of contributor: Kelley, Annette Contributor address; City; State; Zip Code: Missouri City, TX 77489	Amount of Contribution ($): $20.00
Principal occupation / Job title (See Instructions): Clerk	Employer (See Instructions):	
Date: 01/09/2026	Full name of contributor: Kenyon, Billy Contributor address; City; State; Zip Code: Houston, TX 77065	Amount of Contribution ($): $20.00
Principal occupation / Job title (See Instructions): Sheet Metal Worker	Employer (See Instructions):	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
02/10/2026	Kenyon, Billy 6 Contributor address; City; State; Zip Code Houston, TX 77065	$20.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Sheet Metal Worker	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/28/2026	Khalil, Hany Contributor address; City; State; Zip Code Houston, TX 77025	$250.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Executive Director	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Kissling, Irene Contributor address; City; State; Zip Code San Antonio, TX 78230	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Kissling, Irene Contributor address; City; State; Zip Code San Antonio, TX 78230	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Kraus, Ashlee Contributor address; City; State; Zip Code Leander, TX 78641	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Social Worker	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/09/2026	LaPray, Matthew 6 Contributor address; City; State; Zip Code Vidor, TX 77662	$20.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Process Operator	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	LaPray, Matthew Contributor address; City; State; Zip Code Vidor, TX 77662	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Process Operator	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Lambert, Darien Contributor address; City; State; Zip Code Athens, TX 75751	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
State employee	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/27/2026	Landin, Yvonne Contributor address; City; State; Zip Code Corpus Christi, TX 78407	$100.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/13/2026	Landry, Richard Contributor address; City; State; Zip Code Port Neches, TX 77651	$125.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
State COPE Fund

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00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/30/2026	Lane, Pat 6 Contributor address; City; State; Zip Code Perrin, TX 76486-7624	$250.00

8 Principal occupation / Job title (See Instructions)
Machinist

9 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Langston, Doyle Contributor address; City; State; Zip Code Fort Worth, TX 76133	$40.00

Principal occupation / Job title (See Instructions)
Letter Carrier

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/06/2026	Levy, Rick Contributor address; City; State; Zip Code Austin, TX 78703	$40.00

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/29/2026	Levy, Rick Contributor address; City; State; Zip Code Austin, TX 78703	$500.00

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Lewis, Kimetra Contributor address; City; State; Zip Code Lancaster, TX 75146	$20.00

Principal occupation / Job title (See Instructions)
Letter Carrier

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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State COPE Fund

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00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
02/10/2026	Lewis, Kimetra 6 Contributor address; City; State; Zip Code Lancaster, TX 75146	$20.00

8 Principal occupation / Job title (See Instructions)
Letter Carrier

9 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/30/2026	Little, Rhonda Contributor address; City; State; Zip Code Vidor, TX 77662	$100.00

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/28/2026	Lopez, Alejandra Contributor address; City; State; Zip Code San Antonio, TX 78210	$50.00

Principal occupation / Job title (See Instructions)
Teacher

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Lopez, Jason Contributor address; City; State; Zip Code Austin, TX 78745	$20.00

Principal occupation / Job title (See Instructions)
Chief of Staff

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Lopez, Jason Contributor address; City; State; Zip Code Austin, TX 78745	$20.00

Principal occupation / Job title (See Instructions)
Chief of Staff

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
State COPE Fund

3 Filer ID (Ethics Commission Filers)
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4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/09/2026	Lopez Jr., David 6 Contributor address; City; State; Zip Code Waxahachie, TX 75167	$40.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Elevator Constructor	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/09/2026	Lopez Jr., David Contributor address; City; State; Zip Code Waxahachie, TX 75167	$40.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Elevator Constructor	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/28/2026	Lovin, Justice Contributor address; City; State; Zip Code San Antonio, TX 78212	$100.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Teacher	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/28/2026	Loya, Diana Contributor address; City; State; Zip Code Dumas, TX 79029	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Educator	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Lugo, Judy Contributor address; City; State; Zip Code El Paso, TX 79930	$10.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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State COPE Fund

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00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
02/10/2026	Lugo, Judy 6 Contributor address; City; State; Zip Code El Paso, TX 79930	$10.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/28/2026	Mackie, Calvin Contributor address; City; State; Zip Code Houston, TX 77047	$500.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Business Agent	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Malfaro, Louis Contributor address; City; State; Zip Code Austin, TX 78702	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Associate ED	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Malfaro, Louis Contributor address; City; State; Zip Code Austin, TX 78702	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Associate ED	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Manion, Luke Contributor address; City; State; Zip Code Houston, TX 77009	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Firefighter	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
02/10/2026	Manion, Luke 6 Contributor address; City; State; Zip Code Houston, TX 77009	$20.00
8 Principal occupation / Job title (See Instructions) Firefighter	9 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Marshall, David Contributor address; City; State; Zip Code Lancaster, TX 75146	$20.00
Principal occupation / Job title (See Instructions) System Tech	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/29/2026	Marshall, David Contributor address; City; State; Zip Code Lancaster, TX 75146	$250.00
Principal occupation / Job title (See Instructions) System Tech	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/09/2026	Marshall, David Contributor address; City; State; Zip Code Lancaster, TX 75146	$20.00
Principal occupation / Job title (See Instructions) System Tech	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Martinez, Diane Contributor address; City; State; Zip Code Spring, TX 77386	$20.00
Principal occupation / Job title (See Instructions) Manager	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
State COPE Fund

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00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
02/10/2026	Martinez, Diane 6 Contributor address; City; State; Zip Code Spring, TX 77386	$20.00
8 Principal occupation / Job title (See Instructions) Manager	9 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Mathias, Bonnie Contributor address; City; State; Zip Code Dallas, TX 75217	$20.00
Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Mathias, Bonnie Contributor address; City; State; Zip Code Dallas, TX 75217	$20.00
Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/13/2026	McDuffie, Sylvia Contributor address; City; State; Zip Code Nederland, TX 77627	$100.00
Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	McMahan, Diana Contributor address; City; State; Zip Code LaPorte, TX 77571-4010	$20.00
Principal occupation / Job title (See Instructions) Communications	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 34/59 Rpt: 47/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
02/10/2026	McMahan, Diana LaPorte, TX 77571-4010	$20.00

8 Principal occupation / Job title (See Instructions): Communications

9 Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/13/2026	Medley, Blake Austin, TX 78745	$40.00

Principal occupation / Job title (See Instructions): Electrician

Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Medley, Thornton Santa Fe, TX 77510	$40.00

Principal occupation / Job title (See Instructions): Union Rep.

Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/10/2026	Medley, Thornton Santa Fe, TX 77510	$40.00

Principal occupation / Job title (See Instructions): Union Rep.

Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/29/2026	Miller, Mark Millsap, TX 76066	$250.00

Principal occupation / Job title (See Instructions): Labor Rep.

Employer (See Instructions):

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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State COPE Fund

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00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/09/2026	Mims, Pauline 6 Contributor address; City; State; Zip Code Arlington, TX 76001	$20.00
8 Principal occupation / Job title (See Instructions) Team Leader	9 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Mims, Pauline Contributor address; City; State; Zip Code Arlington, TX 76001	$20.00
Principal occupation / Job title (See Instructions) Team Leader	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/06/2026	Montemayor, Lorraine Contributor address; City; State; Zip Code Kyle, TX 78640	$20.00
Principal occupation / Job title (See Instructions) Officer	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/13/2026	Montemayor, Lorraine Contributor address; City; State; Zip Code Kyle, TX 78640	$40.00
Principal occupation / Job title (See Instructions) Officer	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/30/2026	Morales, Linda Contributor address; City; State; Zip Code Houston, TX 77009	$250.00
Principal occupation / Job title (See Instructions) Labor Coordinator	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/09/2026	Morris, Micky	$20.00
	6 Contributor address; City; State; Zip Code Melissa, TX 75454	
8 Principal occupation / Job title (See Instructions) Letter Carrier	9 Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Morris, Micky	$20.00
	Contributor address; City; State; Zip Code Melissa, TX 75454	
Principal occupation / Job title (See Instructions) Letter Carrier	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Nauls, James	$20.00
	Contributor address; City; State; Zip Code Missouri City, TX 77489	
Principal occupation / Job title (See Instructions) Communications	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Nauls, James	$20.00
	Contributor address; City; State; Zip Code Missouri City, TX 77489	
Principal occupation / Job title (See Instructions) Communications	Employer (See Instructions)	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	O'Brien, Krissy	$20.00
	Contributor address; City; State; Zip Code Austin, TX 78748	
Principal occupation / Job title (See Instructions) Political Rep.	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 37/59 Rpt: 50/85

2 FILER NAME
State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
02/09/2026	O'Brien, Krissy 6 Contributor address; City; State; Zip Code Austin, TX 78748	$20.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Political Rep.	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	O'Sullivan, John Contributor address; City; State; Zip Code Austin, TX 78741	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Consultant	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	O'Sullivan, John Contributor address; City; State; Zip Code Austin, TX 78741	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Consultant	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Oparinde, Niyi Contributor address; City; State; Zip Code Palestine, TX 75803	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
state employee	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Oparinde, Niyi Contributor address; City; State; Zip Code Palestine, TX 75803	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
state employee	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 38/59 Rpt: 51/85

2 FILER NAME
State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/09/2026	Oppenheim, Richard 6 Contributor address; City; State; Zip Code San Antonio, TX 78213	$10.00

8 Principal occupation / Job title (See Instructions): Musician
9 Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/09/2026	Oppenheim, Richard Contributor address; City; State; Zip Code San Antonio, TX 78213	$10.00

Principal occupation / Job title (See Instructions): Musician
Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Ormsby, Jeff Contributor address; City; State; Zip Code Lexington, TX 78947	$20.00

Principal occupation / Job title (See Instructions): Executive Director
Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Ormsby, Jeff Contributor address; City; State; Zip Code Lexington, TX 78947	$20.00

Principal occupation / Job title (See Instructions): Executive Director
Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Ortiz, Beverly Contributor address; City; State; Zip Code Houston, TX 77027	$20.00

Principal occupation / Job title (See Instructions): Chief of Staff
Employer (See Instructions):

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 39/59 Rpt: 52/85

2 FILER NAME
State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
02/10/2026	Ortiz, Beverly 6 Contributor address; City; State; Zip Code Houston, TX 77027	$20.00

8 Principal occupation / Job title (See Instructions)
Chief of Staff

9 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Osobase, Derrick Contributor address; City; State; Zip Code Austin, TX 78748	$20.00

Principal occupation / Job title (See Instructions)
Union Officer

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Osobase, Derrick Contributor address; City; State; Zip Code Austin, TX 78748	$20.00

Principal occupation / Job title (See Instructions)
Union Officer

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/29/2026	Owen, Martha Contributor address; City; State; Zip Code Austin, TX 78731	$250.00

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Paez, Donna Contributor address; City; State; Zip Code South Houston, TX 77587	$20.00

Principal occupation / Job title (See Instructions)
Longshoreman

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 40/59 Rpt: 53/85

2 FILER NAME
State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
01/09/2026	Pannell, Ann Austin, TX 78748-5240	$20.00
8 Principal occupation / Job title (See Instructions): Office Manager	9 Employer (See Instructions):	
Date: 02/10/2026	Full name of contributor: Pannell, Ann Contributor address; City; State; Zip Code: Austin, TX 78748-5240	Amount of Contribution ($): $20.00
Principal occupation / Job title (See Instructions): Office Manager	Employer (See Instructions):	
Date: 01/30/2026	Full name of contributor: Parker, William Contributor address; City; State; Zip Code: Groves, TX 77619	Amount of Contribution ($): $250.00
Principal occupation / Job title (See Instructions): Union officer	Employer (See Instructions):	
Date: 01/09/2026	Full name of contributor: Perez-Wiseley, Teresa Contributor address; City; State; Zip Code: Austin, TX 78703	Amount of Contribution ($): $10.00
Principal occupation / Job title (See Instructions): Retired	Employer (See Instructions):	
Date: 02/10/2026	Full name of contributor: Perez-Wiseley, Teresa Contributor address; City; State; Zip Code: Austin, TX 78703	Amount of Contribution ($): $10.00
Principal occupation / Job title (See Instructions): Retired	Employer (See Instructions):	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 41/59 Rpt: 54/85

2 FILER NAME
State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/09/2026	Petterway, Artis 6 Contributor address; City; State; Zip Code Houston, TX 77219	$10.00
8 Principal occupation / Job title (See Instructions) Retired	9 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Petterway, Artis Contributor address; City; State; Zip Code Houston, TX 77219	$10.00
Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/06/2026	Pohlmeyer, Tara Contributor address; City; State; Zip Code Austin, TX 78723	$40.00
Principal occupation / Job title (See Instructions) Communications Director	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/13/2026	Pohlmeyer, Tara Contributor address; City; State; Zip Code Austin, TX 78723	$40.00
Principal occupation / Job title (See Instructions) Communications Director	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Pollock, Ryan Contributor address; City; State; Zip Code Austin, TX 78701	$40.00
Principal occupation / Job title (See Instructions) Union Officer	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 42/59 Rpt: 55/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
02/09/2026	Pollock, Ryan Austin, TX 78701	$40.00
8 Principal occupation / Job title (See Instructions)	**9 Employer (See Instructions)**	
Union Officer		

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/27/2026	Pomar, Ana Pfulgerville, TX 78660	$100.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Retired		

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Ramos, Pauline Fort Worth, TX 76133	$20.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Labor Liaison		

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/10/2026	Ramos, Pauline Fort Worth, TX 76133	$20.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Labor Liaison		

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Reagan, Joanna Tyler, TX 75703	$10.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Retired		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 43/59 Rpt: 56/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
02/10/2026	Reagan, Joanna Tyler, TX 75703	$10.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/30/2026	Reid, Edward San Antonio, TX 78249	$100.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/28/2026	Reyna, Adrian San Antonio, TX 78238	$250.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Teacher	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Rias, Adrienne Lott, TX 76656	$10.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/10/2026	Rias, Adrienne Lott, TX 76656	$10.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 44/59 Rpt: 57/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
01/09/2026	Riggs, Carolyn Houston, TX 77044-2672	$10.00
8 Principal occupation / Job title (See Instructions): Retired	9 Employer (See Instructions):	
02/10/2026	Riggs, Carolyn Houston, TX 77044-2672	$10.00
Principal occupation / Job title (See Instructions): Retired	Employer (See Instructions):	
01/06/2026	Rocha, Cindy Crowley, TX 76036	$5.00
Principal occupation / Job title (See Instructions): Retired	Employer (See Instructions):	
01/21/2026	Rocha, Cindy Crowley, TX 76036	$5.00
Principal occupation / Job title (See Instructions): Retired	Employer (See Instructions):	
02/13/2026	Rocha, Cindy Crowley, TX 76036	$5.00
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: 45/59 Rpt: 58/85

2 FILER NAME
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4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
02/13/2026	Rocha, Cindy 6 Contributor address; City; State; Zip Code Crowley, TX 76036	$5.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Salazar, Richard Contributor address; City; State; Zip Code Rusk, TX 75785	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Laundry Manager	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/09/2026	Salazar, Richard Contributor address; City; State; Zip Code Rusk, TX 75785	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Laundry Manager	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Salgado, Jesus Contributor address; City; State; Zip Code Del Rio, TX 78840	$10.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Salgado, Jesus Contributor address; City; State; Zip Code Del Rio, TX 78840	$10.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 46/59 Rpt: 59/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
01/30/2026	Salvatore, Bob Converse, TX 78109	$100.00
8 Principal occupation / Job title (See Instructions)	**9 Employer (See Instructions)**	
Electrician		
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Shaw, Richard Houston, TX 77043	$20.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Retired		
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/10/2026	Shaw, Richard Houston, TX 77043	$20.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Retired		
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/21/2026	Sills, Ed Austin, TX 78759	$100.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Retired		
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Singletary, Charlie West Columbia, TX 77486	$20.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Business Manager		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
02/10/2026	Singletary, Charlie 6 Contributor address; City; State; Zip Code West Columbia, TX 77486	$20.00
8 Principal occupation / Job title (See Instructions) Business Manager	9 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Small, Reginald Contributor address; City; State; Zip Code Dallas, TX 75232	$20.00
Principal occupation / Job title (See Instructions) Communications Consultant	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Small, Reginald Contributor address; City; State; Zip Code Dallas, TX 75232	$20.00
Principal occupation / Job title (See Instructions) Communications Consultant	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Speight, Dennis Contributor address; City; State; Zip Code Austin, TX 78739	$20.00
Principal occupation / Job title (See Instructions) Political Director	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/09/2026	Speight, Dennis Contributor address; City; State; Zip Code Austin, TX 78739	$20.00
Principal occupation / Job title (See Instructions) Political Director	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 48/59 Rpt: 61/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
01/06/2026	Speight, Emily Austin, TX 78739	$20.00
8 Principal occupation / Job title (See Instructions)	**9 Employer (See Instructions)**	
Comptroller		

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/13/2026	Speight, Emily Austin, TX 78739	$20.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Comptroller		

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Suddaby, Ben Austin, TX 78752	$40.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Operation Specialist		

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/09/2026	Suddaby, Ben Austin, TX 78752	$40.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Operation Specialist		

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/28/2026	Suddaby, Iris Austin, TX 78752	$250.00
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Financial Analyst		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 49/59 Rpt: 62/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
01/09/2026	Suplee, Robert Fort Worth, TX 76109	$20.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Printer	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/09/2026	Suplee, Robert Fort Worth, TX 76109	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Printer	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/29/2026	Tamez, Gregory San Antonio, TX 78230	$250.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Business Manager	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Tanguma, Sylvia Edinburg, TX 78539	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Teacher	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/09/2026	Tanguma, Sylvia Edinburg, TX 78539	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Teacher	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 50/59 Rpt: 63/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
01/29/2026	Taylor, Holly Austin, TX 78751	$100.00
8 Principal occupation / Job title (See Instructions): Retired	9 Employer (See Instructions):	
Date: 01/09/2026	Full name of contributor: Thomas, Irmalyn Contributor address; City; State; Zip Code: Beaumont, TX 77705	Amount of Contribution ($): $10.00
Principal occupation / Job title (See Instructions): Retired	Employer (See Instructions):	
Date: 02/10/2026	Full name of contributor: Thomas, Irmalyn Contributor address; City; State; Zip Code: Beaumont, TX 77705	Amount of Contribution ($): $10.00
Principal occupation / Job title (See Instructions): Retired	Employer (See Instructions):	
Date: 01/09/2026	Full name of contributor: Thompson, Paul Contributor address; City; State; Zip Code: El Paso, TX 79902	Amount of Contribution ($): $20.00
Principal occupation / Job title (See Instructions): Firefighter	Employer (See Instructions):	
Date: 02/09/2026	Full name of contributor: Thompson, Paul Contributor address; City; State; Zip Code: El Paso, TX 79902	Amount of Contribution ($): $20.00
Principal occupation / Job title (See Instructions): Firefighter	Employer (See Instructions):	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 51/59 Rpt: 64/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
01/09/2026	Thompson-Lutz, Katherine New Braunfels, TX 78132	$10.00
8 Principal occupation / Job title (See Instructions): Retired	9 Employer (See Instructions):	
02/10/2026	Thompson-Lutz, Katherine New Braunfels, TX 78132	$10.00
Principal occupation / Job title (See Instructions): Retired	Employer (See Instructions):	
01/09/2026	Tijerina, Jeremy Katy, TX 77449	$20.00
Principal occupation / Job title (See Instructions): Elevator Constructor	Employer (See Instructions):	
02/09/2026	Tijerina, Jeremy Katy, TX 77449	$20.00
Principal occupation / Job title (See Instructions): Elevator Constructor	Employer (See Instructions):	
01/09/2026	Tilley, Earnest Forney, TX 75126	$20.00
Principal occupation / Job title (See Instructions): Account Rep,	Employer (See Instructions):	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 52/59 Rpt: 65/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
02/10/2026	Tilley, Earnest Forney, TX 75126	$20.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Account Rep,	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Tiner, Kirk Arlington, TX 76017	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Auto worker	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/10/2026	Tiner, Kirk Arlington, TX 76017	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Auto worker	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Torres, Jose Houston, TX 77011	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
International Rep	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/10/2026	Torres, Jose Houston, TX 77011	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
International Rep	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 53/59 Rpt: 66/85

2 FILER NAME
State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/09/2026	Turner, Tyler 6 Contributor address; City; State; Zip Code Hudson Oaks, TX 76087	$40.00
8 Principal occupation / Job title (See Instructions) Union Officer	9 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Turner, Tyler Contributor address; City; State; Zip Code Hudson Oaks, TX 76087	$40.00
Principal occupation / Job title (See Instructions) Union Officer	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Vargas, Christina Contributor address; City; State; Zip Code El Paso, TX 79930	$20.00
Principal occupation / Job title (See Instructions) state employee	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/09/2026	Vargas, Christina Contributor address; City; State; Zip Code El Paso, TX 79930	$20.00
Principal occupation / Job title (See Instructions) state employee	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Veltz, Yulanda Contributor address; City; State; Zip Code Hockley, TX 77447	$20.00
Principal occupation / Job title (See Instructions) Equipment Tech	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 54/59 Rpt: 67/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
02/10/2026	Veltz, Yulanda Hockley, TX 77447	$20.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Equipment Tech	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Vera, Nancy Corpus Christi, TX 78415	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Union officer	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/10/2026	Vera, Nancy Corpus Christi, TX 78415	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Union officer	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Villarreal, Anastasia Austin, TX 78748	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Nurse	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/09/2026	Villarreal, Anastasia Austin, TX 78748	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Nurse	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 55/59 Rpt: 68/85

2 FILER NAME
State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/09/2026	Villarreal, Carlos 6 Contributor address; City; State; Zip Code Houston, TX 77049	$20.00
8 Principal occupation / Job title (See Instructions) Electrician	9 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Villarreal, Carlos Contributor address; City; State; Zip Code Houston, TX 77049	$20.00
Principal occupation / Job title (See Instructions) Electrician	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Warwick, Price Contributor address; City; State; Zip Code Arlington, TX 76018	$40.00
Principal occupation / Job title (See Instructions) Union Rep	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/29/2026	Warwick, Price Contributor address; City; State; Zip Code Arlington, TX 76018	$500.00
Principal occupation / Job title (See Instructions) Union Rep	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/09/2026	Warwick, Price Contributor address; City; State; Zip Code Arlington, TX 76018	$40.00
Principal occupation / Job title (See Instructions) Union Rep	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 56/59 Rpt: 69/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
01/09/2026	Washenfelder, Karrie Richmond, TX 77469	$20.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Union officer	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/10/2026	Washenfelder, Karrie Richmond, TX 77469	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Union officer	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/09/2026	Whitaker, Charles Terrell, TX 75160	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Communications	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
02/10/2026	Whitaker, Charles Terrell, TX 75160	$20.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Communications	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of Contribution ($)
01/30/2026	White, Linda Corpus Christi, TX 78412	$500.00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 57/59 Rpt: 70/85

2 FILER NAME
State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/29/2026	Williams, Maileen 6 Contributor address; City; State; Zip Code Burleson, TX 76028	$500.00
8 Principal occupation / Job title (See Instructions) Team Leader	9 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/28/2026	Williams, Sarah Contributor address; City; State; Zip Code Harker Heights, TX 76548	$100.00
Principal occupation / Job title (See Instructions) Government Employee	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/28/2026	Williams, Sarah Contributor address; City; State; Zip Code Harker Heights, TX 76548	$150.00
Principal occupation / Job title (See Instructions) Government Employee	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/09/2026	Wiltz, Debbie Contributor address; City; State; Zip Code Houston, TX 77028	$10.00
Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
02/10/2026	Wiltz, Debbie Contributor address; City; State; Zip Code Houston, TX 77028	$10.00
Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 58/59 Rpt: 71/85

2 FILER NAME: State COPE Fund

3 Filer ID (Ethics Commission Filers): 00018807

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of Contribution ($)
01/09/2026	Worthey, Joshua Granbury, TX 76049	$40.00
8 Principal occupation / Job title (See Instructions): Business Manager	9 Employer (See Instructions):	
Date: 01/28/2026	Full name of contributor ☐ out-of-state PAC (ID#:_____): Worthey, Joshua Contributor address; City; State; Zip Code: Granbury, TX 76049	Amount of Contribution ($): $250.00
Principal occupation / Job title (See Instructions): Business Manager	Employer (See Instructions):	
Date: 02/10/2026	Full name of contributor ☐ out-of-state PAC (ID#:_____): Worthey, Joshua Contributor address; City; State; Zip Code: Granbury, TX 76049	Amount of Contribution ($): $40.00
Principal occupation / Job title (See Instructions): Business Manager	Employer (See Instructions):	
Date: 02/13/2026	Full name of contributor ☐ out-of-state PAC (ID#:_____): Wyllie, Everett Contributor address; City; State; Zip Code: Waco, TX 76710	Amount of Contribution ($): $250.00
Principal occupation / Job title (See Instructions): Letter Carrier	Employer (See Instructions):	
Date: 01/30/2026	Full name of contributor ☐ out-of-state PAC (ID#:_____): Young, Mark Contributor address; City; State; Zip Code: Channelview, TX 77530	Amount of Contribution ($): $250.00
Principal occupation / Job title (See Instructions): Analyzer Technician	Employer (See Instructions):	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 59/59 Rpt: 72/85

2 FILER NAME
State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date
01/09/2026

5 Full name of contributor ☐ out-of-state PAC (ID#:_____)
Young, W. R.

6 Contributor address; City; State; Zip Code
Austin, TX 78748-5038

7 Amount of Contribution ($)
$20.00

8 Principal occupation / Job title (See Instructions)
Director

9 Employer (See Instructions)

Date
02/10/2026

Full name of contributor ☐ out-of-state PAC (ID#:_____)
Young, W. R.

Contributor address; City; State; Zip Code
Austin, TX 78748-5038

Amount of Contribution ($)
$20.00

Principal occupation / Job title (See Instructions)
Director

Employer (See Instructions)

NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule C4:
Sch: 1/1 Rpt: 73/85

2 FILER NAME
State COPE Fund

3 Filer ID (Ethics Commission Filers)
00018807

4 Date	**5** Corporation / Labor Organization name	**6** Amount ($)
01/13/2026	Texas AFL-CIO	50.79
Date	Corporation / Labor Organization name	Amount ($)
01/14/2026	Texas AFL-CIO	40.63
Date	Corporation / Labor Organization name	Amount ($)
01/20/2026	Texas AFL-CIO	172.68

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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/12 Rpt: 74/85	State COPE Fund	00018807

4 Date	5 Payee name
02/09/2026	Adrian Reyna Campaign

6 Amount ($)	7 Payee address; City; State; Zip Code
$500.00 ☐ Expenditure from corporate funds	PO Box 681435 San Antonio, TX 78268

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 125

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/09/2026	Armando Walle Campaign

Amount ($)	Payee address; City; State; Zip Code
$500.00 ☐ Expenditure from corporate funds	4101 Washington Ave. Houston, TX 77007

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 140

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/09/2026	Ashley Bean Thornton Campaign

Amount ($)	Payee address; City; State; Zip Code
$500.00 ☐ Expenditure from corporate funds	Suite 2B Box 193 4300 W Waco Drive Waco, TX 76710

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 56

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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/12 Rpt: 75/85	State COPE Fund	00018807

4 Date	5 Payee name
02/09/2026	Brett Robinson Campaign

6 Amount ($)	7 Payee address; City; State; Zip Code
$500.00 ☐ Expenditure from corporate funds	PO Box 761 Cypress, TX 77410

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 130

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/09/2026	Charlene Ward Johnson Campaign

Amount ($)	Payee address; City; State; Zip Code
$500.00 ☐ Expenditure from corporate funds	PO Box 925775 Houston, TX 77292

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 139

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/05/2026	Chris Turner Campaign

Amount ($)	Payee address; City; State; Zip Code
$500.00 ☐ Expenditure from corporate funds	P. O. Box 182093 Arlington, TX 76096

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 101

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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 3/12 Rpt: 76/85	State COPE Fund	00018807

4 Date	5 Payee name
02/09/2026	Christie Wood Campaign

6 Amount ($)	7 Payee address; City; State; Zip Code
$500.00 ☐ Expenditure from corporate funds	1020 Coit St. Denton, TX 76201

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 64

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/09/2026	Danny Norris Campaign

Amount ($)	Payee address; City; State; Zip Code
$500.00 ☐ Expenditure from corporate funds	PO Box 683163 Houston, TX 77268

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 142

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/09/2026	Darlene Breaux Campaign

Amount ($)	Payee address; City; State; Zip Code
$500.00 ☐ Expenditure from corporate funds	PO Box 956 Alief, TX 77411

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 149

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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/12 Rpt: 77/85	State COPE Fund	00018807

4 Date	5 Payee name
02/09/2026	Diane Symons Campaign

6 Amount ($)	7 Payee address; City; State; Zip Code
$500.00 ☐ Expenditure from corporate funds	1307 Mildred Ln Benbrook, TX 76126

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 97

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
01/02/2026	Elavon

Amount ($)	Payee address; City; State; Zip Code
$37.51 ☐ Expenditure from corporate funds	7300 Chapman Hwy Knoxville, TN 37920

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Credit Card Processing Fees

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/02/2026	Elavon

Amount ($)	Payee address; City; State; Zip Code
$21.54 ☐ Expenditure from corporate funds	7300 Chapman Hwy Knoxville, TN 37920

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Credit Card Processing Fees

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/12 Rpt: 78/85	State COPE Fund	00018807

4 Date	5 Payee name
02/02/2026	Elavon

6 Amount ($)	7 Payee address; City; State; Zip Code
$17.77 ☐ Expenditure from corporate funds	7300 Chapman Hwy Knoxville, TN 37920

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Credit Card Processing Fees

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/09/2026	Eliz Markowitz Campaign

Amount ($)	Payee address; City; State; Zip Code
$500.00 ☐ Expenditure from corporate funds	24111 Haywards Crossing Ln Katy, TX 77494

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 26

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/09/2026	Gina Hinojosa for Governor

Amount ($)	Payee address; City; State; Zip Code
$2,500.00 ☐ Expenditure from corporate funds	PO Box 300095 Austin, TX 78703

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution Governor

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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 6/12 Rpt: 79/85	State COPE Fund	00018807

4 Date	5 Payee name
02/09/2026	Jeremy Hendricks Campaign

6 Amount ($)	7 Payee address; City; State; Zip Code
$500.00 ☐ Expenditure from corporate funds	3110 Manor Rd. Ste. H Austin, TX 78753

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 50

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/09/2026	Jordan Brown Campaign

Amount ($)	Payee address; City; State; Zip Code
$500.00 ☐ Expenditure from corporate funds	4102 S New Braunfels Ave. Ste. 110 San Antonio, TX 78223

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 120

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/09/2026	Jose Loya Campaign

Amount ($)	Payee address; City; State; Zip Code
$2,500.00 ☐ Expenditure from corporate funds	PO Box 1124 Dumas, TX 79029

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution Land Commissioner

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: 7/12 Rpt: 80/85	**2** FILER NAME State COPE Fund	**3** Filer ID (Ethics Commission Filers) 00018807

4 Date 02/09/2026

5 Payee name Lawrence Allen, Jr. Campaign

6 Amount ($) $500.00

☐ Expenditure from corporate funds

7 Payee address; City; State; Zip Code
3717 Cork Dr.
Houston, TX 77047

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)
Contributions/Donations Made By Candidate/Officeholder/Political Committee

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
Campaign Contribution HD 131

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 02/09/2026

Payee name Marcos Velez Campaign

Amount ($) $2,500.00

☐ Expenditure from corporate funds

Payee address; City; State; Zip Code
PO Box 1331
Deer Park, TX 77536

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)
Contributions/Donations Made By Candidate/Officeholder/Political Committee

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
Campaign Contribution Lt. Governor

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 02/05/2026

Payee name Mary Ann Perez Campaign

Amount ($) $500.00

☐ Expenditure from corporate funds

Payee address; City; State; Zip Code
6200 Gulf Freeway Ste. 125
Houston, TX 77023

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)
Contributions/Donations Made By Candidate/Officeholder/Political Committee

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
Campaign Contribution HD 144

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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 8/12 Rpt: 81/85	State COPE Fund	00018807

4 Date	5 Payee name
02/09/2026	Mary Wells Campaign

6 Amount ($)	7 Payee address; City; State; Zip Code
$500.00	915 Davis Street
☐ Expenditure from corporate funds	Cleburne, TX 76033

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 58

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/09/2026	Montserrat Garibay Campaign

Amount ($)	Payee address; City; State; Zip Code
$500.00	PO Box 80498
☐ Expenditure from corporate funds	Austin, TX 78708

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 49

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/09/2026	Nathan Johnson for Attorney General

Amount ($)	Payee address; City; State; Zip Code
$2,500.00	902 E 5th St. #202E
☐ Expenditure from corporate funds	Austin, TX 78702

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution Attorney General

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/12 Rpt: 82/85	**2** FILER NAME State COPE Fund	**3** Filer ID (Ethics Commission Filers) 00018807

4 Date 02/09/2026

5 Payee name Pooja Sethi Campaign

6 Amount ($) $500.00

☐ Expenditure from corporate funds

7 Payee address; City; State; Zip Code
4321 House of York
Austin, TX 78730

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)
Contributions/Donations Made By Candidate/Officeholder/Political Committee

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
Campaign Contribution HD 47

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 02/09/2026

Payee name Robert Mihara Campaign

Amount ($) $500.00

☐ Expenditure from corporate funds

Payee address; City; State; Zip Code
11844 Bandera Rd. PMB 712
Helotes, TX 78023

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)
Contributions/Donations Made By Candidate/Officeholder/Political Committee

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
Campaign Contribution HD 117

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 02/09/2026

Payee name Ron Reynolds Campaign

Amount ($) $500.00

☐ Expenditure from corporate funds

Payee address; City; State; Zip Code
6140 Hwy 6 South Ste. 233
Missouri City, TX 77459

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)
Contributions/Donations Made By Candidate/Officeholder/Political Committee

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
Campaign Contribution HD 27

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 10/12 Rpt: 83/85	State COPE Fund	00018807

4 Date	5 Payee name
02/09/2026	Ryan Ayala Campaign

6 Amount ($)	7 Payee address; City; State; Zip Code
$500.00 ☐ Expenditure from corporate funds	3822 Blue Oak Pass San Antonio, TX 78223

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 119

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/09/2026	Sandy Ibanez Campaign

Amount ($)	Payee address; City; State; Zip Code
$500.00 ☐ Expenditure from corporate funds	PO Box 16871 Sugar Land, TX 77496

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 28

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/09/2026	Sarah Eckhardt for Comptroller

Amount ($)	Payee address; City; State; Zip Code
$2,500.00 ☐ Expenditure from corporate funds	PO Box 300441 Austin, TX 78703

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution Comptroller

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 11/12 Rpt: 84/85	State COPE Fund	00018807

4 Date	5 Payee name
01/27/2026	Stripe Payments Company

6 Amount ($)	7 Payee address; City; State; Zip Code
$36.20 ☐ Expenditure from corporate funds	510 Townsend St. San Francisco, CA 94103

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Credit Card Processing Fees

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
01/28/2026	Stripe Payments Company

Amount ($)	Payee address; City; State; Zip Code
$125.20 ☐ Expenditure from corporate funds	510 Townsend St. San Francisco, CA 94103

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Fees	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Credit Card Processing Fees

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
02/09/2026	Suleman Lalani Campaign

Amount ($)	Payee address; City; State; Zip Code
$500.00 ☐ Expenditure from corporate funds	PO Box 6514 Houston, TX 77265

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 76

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: 12/12 Rpt: 85/85	**2** FILER NAME State COPE Fund	**3** Filer ID (Ethics Commission Filers) 00018807
4 Date 02/09/2026	**5** Payee name Venton Jones Campaign	
6 Amount ($) $500.00 ☐ Expenditure from corporate funds	**7** Payee address; City; State; Zip Code PO Box 222128 Dallas, TX 75222	
8 **PURPOSE OF EXPENDITURE**	**(a)** Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	**(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign Contribution HD 100

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held