

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

| | | | | | | |
|--|--|--------------------------------------|--|--------------------------------------|---|---|
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR Ms. | FIRST LaBessa | MI | OFFICE USE ONLY | | |
| | NICKNAME | LAST Quintana | SUFFIX | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX: 2025 E 7th | APT / SUITE #: APT 215 | CITY: Austin | STATE: TX | ZIP CODE 78702 | Date Received October 7, 2024 by Edna Butts |
| | | | | | | |
| 5 CANDIDATE / OFFICEHOLDER PHONE | AREA CODE (512) | PHONE NUMBER 902-9780 | EXTENSION | | Date Hand-delivered or Date Postmarked Oct. 7, 2024 | |
| 6 CAMPAIGN TREASURER NAME | MS / MRS / MR Ms. | FIRST Cristina | MI | Receipt # N/A | | Amount \$ N/A |
| | NICKNAME | LAST Ayala | SUFFIX | Date Processed | | Date Imaged |
| 7 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE | | | | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE (240) | PHONE NUMBER 381-8042 | EXTENSION | | | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR) | | | | | |
| 10 PERIOD COVERED | Month Day Year 8 / 26 / 24 | | | Month Day Year 9 / 26 / 24 | | |
| 11 ELECTION | ELECTION DATE Month Day Year 11 / 5 / 24 | | ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special | | | |
| 12 OFFICE | OFFICE HELD (if any) N/A | | 13 OFFICE SOUGHT (if known) District AKD Board of Trustees 2 | | | |
| 14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. | | | | | |
| | COMMITTEE TYPE | COMMITTEE NAME | | | | |
| | <input type="checkbox"/> GENERAL | COMMITTEE ADDRESS | | | | |
| | <input type="checkbox"/> SPECIFIC | COMMITTEE CAMPAIGN TREASURER NAME | | | | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS | | | | |

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

| | | |
|--------------------------------------|---|--|
| 15 C/OH NAME <u>LaRessa Quintana</u> | | 16 Filer ID (Ethics Commission Filers) |
| 17 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ <u>16,658.90</u> |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE | \$ |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ <u>4,850.59</u> |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | \$ <u>11,808.31</u> |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ |

18 SIGNATURE 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.

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by _____ 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

OR

(2) Unsworn Declaration

My name is LaRessa Quintana, and my date of birth is 12/31/1994.
My address is 2025 E 7th St, Austin, TX, 78702, USA.
(street) (city) (state) (zip code) (country)
Executed in Travis County, State of Texas, on the 7 day of October, 20 24.
(month) (year)
LaRessa Quintana
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

| | | |
|---|---|--|
| 19 FILER NAME <i>Larissa Quintana</i> | | 20 Filer ID (Ethics Commission Filers) |
| 21 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ <i>16,658.9</i> |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 5. | <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ <i>4,850.59</i> |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS | \$ <i>11,808.31</i> |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: 15 |
| 2 FILER NAME Larissa Quintana | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 9/26/24 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorena Campos 6 Contributor address; City; State; Zip Code 2823 E. MLK Blvd #1003 Austin, TX 78702 | 7 Amount of contribution (\$) \$250.00 |
| 8 Principal occupation / Job title (See Instructions) Principal | | 9 Employer (See Instructions) Campos Consulting Group, LLC |
| Date 9/26/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramiro Diaz Contributor address; City; State; Zip Code 3316 Colorado Ave Austin, TX, 78744 | Amount of contribution (\$) \$1,500.00 |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) HEB |
| Date 9/26/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karrol Rimal Contributor address; City; State; Zip Code 1711 Perez St, Unit B, Austin, TX, 78721 | Amount of contribution (\$) \$150.00 |
| Principal occupation / Job title (See Instructions) House of Representatives | | Employer (See Instructions) Advisor |
| Date 9/26/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jessica Escobar Contributor address; City; State; Zip Code 11337 Pebble Garden Ln. Austin, TX, 78739 | Amount of contribution (\$) \$150.00 |
| Principal occupation / Job title (See Instructions) TFFA | | Employer (See Instructions) Attorney |
| <p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT Include this page in the report.

| | | |
|--|--|---------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: |
| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) 6 Contributor address; City; State; Zip Code | 7 Amount of contribution (\$) |
| 9/21/24 | Minda Anderson 3414 Dunleigh Dr, Austin, TX 78745 | \$20 ⁰⁰ |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Librarian | | Austin ISD |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code | Amount of contribution (\$) |
| 9/21/24 | Rachel Stone 913 Nile St Austin, TX, 78702 | \$100 ⁰⁰ |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| GNDC | | Lawyer |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code | Amount of contribution (\$) |
| 9/19/24 | Carolina Calvo 3710 Lone Pine Dr, Santa Fe, TX 77510 | \$50 ⁰⁰ |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Government Relations Manager | | Houston Food Bank |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code | Amount of contribution (\$) |
| 9/17/24 | Christopher Rios 18100 Gentry Dr. Pflugerville, TX 78660 | \$100 ⁰⁰ |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Banker | | Wells Fargo |
| <p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

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| The instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: |
| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 9/13/24 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Joseph Lawe 6 Contributor address; City; State; Zip Code 401 Little Texas Ln Austin, TX, 78745 | 7 Amount of contribution (\$) \$200.00 |
| 8 Principal occupation / Job title (See Instructions) Hardware Developer | | 9 Employer (See Instructions) IBM |
| Date 9/9/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Martha Orozco Contributor address; City; State; Zip Code 1104 Glen Summer Dr. Austin, TX, 78753 | Amount of contribution (\$) \$300 |
| Principal occupation / Job title (See Instructions) Associate | | Employer (See Instructions) Hertz |
| Date 9/8/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Damian Pantoja Contributor address; City; State; Zip Code 2301 Grove Blvd Austin, TX, 78741 | Amount of contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Community Engagement Specialist | | Employer (See Instructions) City of Austin |
| Date 9/6/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jimmy Flannigan Contributor address; City; State; Zip Code 12803 Michelangelo Austin, TX, 78729 | Amount of contribution (\$) \$94.70 |
| Principal occupation / Job title (See Instructions) Austin, Cowaction Enterprises | | Employer (See Instructions) Public Administration |
| <p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: |
| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 9/6/24 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emily Marks 6 Contributor address; City; State; Zip Code 2509 Hale Ave Memphis, TN, 38112 | 7 Amount of contribution (\$) \$ 250.00 |
| 8 Principal occupation / Job title (See Instructions) Arts manager | | 9 Employer (See Instructions) Self |
| Date 9/5/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Brey Campaign Contributor address; City; State; Zip Code P.O. Box 530 Austin, TX, 78767 | Amount of contribution (\$) \$ 237.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 9/4/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keith Wagner Contributor address; City; State; Zip Code 1640 W. 6th St Austin, TX, 78703 | Amount of contribution (\$) \$ 300.00 |
| Principal occupation / Job title (See Instructions) Ass. Instructor & student | | Employer (See Instructions) UT Austin |
| Date 9/4/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah Hummel Contributor address; City; State; Zip Code 4706 Pennington Ct. Indianapolis IN, 46254 | Amount of contribution (\$) \$ 100.00 |
| Principal occupation / Job title (See Instructions) CEO & Founder | | Employer (See Instructions) Retail Politics |
| <p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: |
| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 8/24/20 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jay Scheinman 6 Contributor address; City; State; Zip Code 308 Magnolia St Bentville, AR, 72712 | 7 Amount of contribution (\$) \$ 50.00 |
| 8 Principal occupation / Job title (See Instructions) Gov. Relations manager | | 9 Employer (See Instructions) Earn In |
| Date 8/23/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Adrian Alvarado Contributor address; City; State; Zip Code | Amount of contribution (\$) \$ 100.00 |
| Principal occupation / Job title (See Instructions) 3rd District VP | | Employer (See Instructions) Texas State Assoc. of Firefighters |
| Date 8/23/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Juliana Cruz Kerker Contributor address; City; State; Zip Code 8508 Burrell Dr Austin, TX 78757 | Amount of contribution (\$) \$ 250.00 |
| Principal occupation / Job title (See Instructions) Director of Government Relations | | Employer (See Instructions) HCA Healthcare |
| Date 8/22/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Aylan Luna Contributor address; City; State; Zip Code 2408 Dielman Dr. Seguin, TX, 78155 | Amount of contribution (\$) \$ 250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: |
| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 8/22/24 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Greg Anderson 6 Contributor address; City; State; Zip Code 1701 Sigmond Ave Austin, TX, 78723 | 7 Amount of contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) Director of Community Affairs | | 9 Employer (See Instructions) Habitat for Humanity |
| Date 8/22/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ramin Diaz Contributor address; City; State; Zip Code 3316 Colorado High Ave Austin, TX 78744 | Amount of contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) Software Engineer | | Employer (See Instructions) HEB |
| Date 8/21/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Celso + Samantha Baez Contributor address; City; State; Zip Code 2606 Rogers Ave Austin, TX, 78722 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 8/21/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Stephanie Simpson Contributor address; City; State; Zip Code 1910 Collier St Austin, TX 78704 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Senior Director State Gov. Relations | | Employer (See Instructions) Sanofi |
| <p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

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| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) | 7 Amount of contribution (\$) |
| 8/19/24 | Raul Longoria 6 Contributor address; City; State; Zip Code 2526 Darwood St Austin, TX, 78704 | \$50.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Student | | UT Austin |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) | Amount of contribution (\$) |
| 8/19/24 | Ruben Cantu Contributor address; City; State; Zip Code 3605 Pennsylvania Ave, Austin, TX 78721 | \$25.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Founder / CEO | | Self, LMNTS |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) | Amount of contribution (\$) |
| | Contributor address; City; State; Zip Code | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| | | |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) | Amount of contribution (\$) |
| | Contributor address; City; State; Zip Code | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: | 7 Amount of contribution (\$) |
| 9/26/24 | Jennifer Williams Pavich 6 Contributor address; City; State; Zip Code 717 Marc Taylor Dr. Austin, TX, 78745 | \$5000 |
| 8 Principal occupation / Job title (See Instructions) Consultant | | 9 Employer (See Instructions) Self |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: | Amount of contribution (\$) |
| 9/26/24 | Estevan Delgado Contributor address; City; State; Zip Code 6029 Clover Walk In Richmond TX 77469 | \$15000 |
| Principal occupation / Job title (See Instructions) Rockwell Fund | | Employer (See Instructions) Senior Program officer |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: | Amount of contribution (\$) |
| 9/25/24 | Revelynn Lawson Contributor address; City; State; Zip Code | \$10000 |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Self |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: | Amount of contribution (\$) |
| 9/24/24 | Caroline Sweet Contributor address; City; State; Zip Code 1213 Garnet Mill Ln Austin, TX, 78744 | \$10000 |
| Principal occupation / Job title (See Instructions) Austin, ISD | | Employer (See Instructions) Instructional coach |
| <p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

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| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 9/24/24 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Paulina Artieda 6 Contributor address; City; State; Zip Code 8008 MellenCamp Dr. Austin, TX, 78744 | 7 Amount of contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) The New Philanthropists | | 9 Employer (See Instructions) Executive Director |
| Date 9/23/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Alice Woods Contributor address; City; State; Zip Code 1805 South 34th St Austin, TX, 78704 | Amount of contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Broadleaf Community Cen. |
| Date 9/22/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Arthur Soto Contributor address; City; State; Zip Code 9653 McPherson Rd. Laredo, TX, 78045 | Amount of contribution (\$) \$30.00 |
| Principal occupation / Job title (See Instructions) University of Nevada, Las Vegas | | Employer (See Instructions) Professor |
| Date 9/21/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Cristina Ayala Contributor address; City; State; Zip Code | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

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| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 9/21/24 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Kenna Okoro 6 Contributor address; City; State; Zip Code 2900 Sunridge Dr. Austin, TX, 78741 | 7 Amount of contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) Lawyer | | 9 Employer (See Instructions) Okoro Law |
| Date 9/21/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Irma Reyes Contributor address; City; State; Zip Code 3715 S. 18th St Austin, TX, 78704 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Executive Director | | Employer (See Instructions) Mexican American Leg. Caus |
| Date 9/21/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Juan Escobar Contributor address; City; State; Zip Code 11337 Pebble Garden Ln Austin, TX, 78739 | Amount of contribution (\$) \$150.00 |
| Principal occupation / Job title (See Instructions) Banker | | Employer (See Instructions) Bank |
| Date 9/21/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lauren Hadley Contributor address; City; State; Zip Code 105 W 51st St Austin, TX, 78751 | Amount of contribution (\$) \$237.20 |
| Principal occupation / Job title (See Instructions) Texas Senate | | Employer (See Instructions) Legislative Director |
| <p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

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| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 8/21/24 | 5 Full name of contributor Talan Tyminski <input type="checkbox"/> out-of-state PAC (ID#: 6 Contributor address; City; State; Zip Code 5508 Hearsay Dr Austin, TX, 78744 | 7 Amount of contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) Senior Vice President | | 9 Employer (See Instructions) MACH 1 Group |
| Date 8/19/24 | Full name of contributor Denise Rose <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code 2400 Webberville Rd Austin, TX, 78702 | Amount of contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Governmental Affairs Consultant | | Employer (See Instructions) Jackson Walker, LLP |
| Date 8/19/24 | Full name of contributor Diana Arevalo <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code 242 Leming San Antonio, TX, 78204 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Managing Director of Advocacy | | Employer (See Instructions) ALS Association |
| Date 8/19/24 | Full name of contributor Lawrence Garzales <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code 1076 Verbana Dr. Austin, TX, 78750 | Amount of contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Sr. Organizational Change Man Spec | | Employer (See Instructions) TPS |
| <p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: |
| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 8/28/24 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Adam Powell 6 Contributor address; City; State; Zip Code 8805 Dawnridge Dr. Austin, TX, 78757 | 7 Amount of contribution (\$) \$15.00 |
| 8 Principal occupation / Job title (See Instructions) Unemployed | | 9 Employer (See Instructions) |
| Date 8/28/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Carlos De La Peña Contributor address; City; State; Zip Code 4009 Sabio Dr. Austin, TX, 78749 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Partner | | Employer (See Instructions) Texas Lobby Partners |
| Date 8/28/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Curtis Smith Contributor address; City; State; Zip Code 6600 Rancho Dr. Austin, TX, 78744 | Amount of contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) Government Affairs | | Employer (See Instructions) Texas Nursery & Landscape Assoc. |
| Date 8/27/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Kylan Lee Contributor address; City; State; Zip Code 11404 June Dr. Austin, TX, 78753 | Amount of contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) Counselor | | Employer (See Instructions) Self |
| <p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: |
| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jose Reyes | 7 Amount of contribution (\$) \$40 ⁰⁰ |
| 8/30/24 | 6 Contributor address; City; State; Zip Code 2760 Travis St. Houston, TX, 77006 | |
| 8 Principal occupation / Job title (See Instructions) Student | | 9 Employer (See Instructions) Thurgood Marshall School of Law |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merced Aguilar | Amount of contribution (\$) \$200 ⁰⁰ |
| 8/29/24 | Contributor address; City; State; Zip Code 6011 Holden Oaks, Corpus Christi 78412 | |
| Principal occupation / Job title (See Instructions) Grader | | Employer (See Instructions) King crossing prison ministries |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nathan Ryan | Amount of contribution (\$) \$50 ⁰⁰ |
| 8/29/24 | Contributor address; City; State; Zip Code 1307 W 39 th 1/2 St. Austin, TX, 78756 | |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Self |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texanna Turner | Amount of contribution (\$) \$50 ⁰⁰ |
| 8/29/24 | Contributor address; City; State; Zip Code 604 Whipple Way Austin, TX, 78745 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: |
| 2 FILER NAME LaBessa Quintana | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 8/27/24 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Paula Guerrero | 7 Amount of contribution (\$) \$300.00 |
| 6 Contributor address; City; State; Zip Code P.O. Box 354 Gregory TX 78359 | | |
| 8 Principal occupation / Job title (See Instructions) Associate | | 9 Employer (See Instructions) Walgreens |
| Date 9/25/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Cole Lopez, Lia Guerra | Amount of contribution (\$) \$500.00 |
| Contributor address; City; State; Zip Code 5828 Zachary St. Austin, TX 78747 | | |
| Principal occupation / Job title (See Instructions) partner | | Employer (See Instructions) Kohn + Associates |
| Date 9/25/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Carmie Krou | Amount of contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code Bl Running Deer Ln Dripping Springs 78620 | | |
| Principal occupation / Job title (See Instructions) VP of Advocacy, Public Policy | | Employer (See Instructions) Texas Hospital Assoc. |
| Date 9/21/24 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lori Renteria | Amount of contribution (\$) \$50.00 |
| Contributor address; City; State; Zip Code 1511 Haskele st. Austin, TX, 78702 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| <p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p> | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: |
| 2 FILER NAME | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="border-bottom: 1px solid black; margin-top: 5px;">Lloyd Doggett</div> | 7 Amount of contribution (\$) <div style="border-bottom: 1px solid black; margin-top: 5px;">\$250.00</div> |
| 6 Contributor address; City; State; Zip Code | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="border-bottom: 1px solid black; margin-top: 5px;">Education Austin PAC</div> | Amount of contribution (\$) <div style="border-bottom: 1px solid black; margin-top: 5px;">\$5,000.00</div> |
| Contributor address; City; State; Zip Code | | |
| 8716 North Mopac Austin, TX, 78759 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="border-bottom: 1px solid black; margin-top: 5px;">Patricia Shipton</div> | Amount of contribution (\$) <div style="border-bottom: 1px solid black; margin-top: 5px;">\$500.00</div> |
| Contributor address; City; State; Zip Code | | |
| 919 Congress Ave Austin, TX, 78712 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="border-bottom: 1px solid black; margin-top: 5px;"></div> | Amount of contribution (\$) <div style="border-bottom: 1px solid black; margin-top: 5px;"></div> |
| Contributor address; City; State; Zip Code | | |
| | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| | | |

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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: <u>2</u> | | 2 FILER NAME <u>LaRESSa Quintana</u> | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date <u>10/7/24</u> | | 5 Payee name <u>Donate Way</u> | | | |
| 6 Amount (\$) <u>524.16</u> | | 7 Payee address; City: State: Zip Code <u>P.O. Box 301207 Austin TX 70703</u> | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) <u>Fees</u> | | (b) Description <u>Card fees</u> | | |
| | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | | | | | |
| <hr/> | | | | | |
| Date <u>8/27/24</u> | | Payee name <u>Austin Ed. Fund</u> | | | |
| Amount (\$) <u>150.48</u> | | Payee address; City: State: Zip Code <u>4000 S Interstate 35 Austin, TX, 78704</u> | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) <u>Event expense</u> | | Description <u>Ticket purchase</u> | | |
| | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | | | | | |
| <hr/> | | | | | |
| Date <u>8/27/24</u> | | Payee name <u>DOVE Springs Blvd / Ricardo Zavala</u> | | | |
| Amount (\$) <u>103.20</u> | | Payee address; City: State: Zip Code <u>Austin TX 78744</u> | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) <u>Event expense</u> | | Description <u>Ticket Purchase</u> | | |
| | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | | | | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | | | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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 LaRessa Quintana | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 9/19/24 | | 5 Payee name CROSSroads consultative | | | |
| 6 Amount (\$) 500 | | 7 Payee address; City; State; Zip Code 1616 W 6th St Austin, TX 78703 | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contract Labor | | (b) Description Logo creation | | |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 9/23/24 | | Payee name Pueblo Viejo Food | | | |
| Amount (\$) 87.27 | | Payee address; City; State; Zip Code 3901 Promontory Pt Dr Austin TX 78744 | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Food expense | | Description Food purchase for campaign event | | |
| | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 9/13/24 | | Payee name CheckMark | | | |
| Amount (\$) 3,479.55 | | Payee address; City; State; Zip Code 3217 N I35 Austin, TX, 78722 | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | | Description yard signs, lit. stickers | | |
| | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

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 G: <div style="text-align: center; font-size: 1.5em;">2</div> | 2 FILER NAME <div style="font-size: 1.2em;">Larissa Quintana</div> | 3 Filer ID (Ethics Commission Filers) |
| 4 Date <div style="font-size: 1.2em;">8/21/24</div> | 5 Payee name <div style="font-size: 1.2em;">USPS</div> | |
| 6 Amount (\$) <div style="font-size: 1.2em;">49.00</div> <div style="margin-top: 5px;"> <input type="checkbox"/> Reimbursement from political contributions intended </div> | 7 Payee address; City; State; Zip Code <div style="font-size: 1.2em;">823 Congress Ave Austin, TX, 78701</div> | |
| 8 PURPOSE OF EXPENDITURE | <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> (a) Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">Rental Expense</div> </div> <div style="width: 48%;"> (b) Description <div style="font-size: 1.2em;">P.O. Box</div> </div> </div> | |
| | <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. </div> <div style="width: 48%;"> <input type="checkbox"/> Check if Austin, TX, officeholder living expense </div> </div> | |
| 9 Complete ONLY if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">Candidate / Officeholder name</div> <div style="width: 30%;">Office sought</div> <div style="width: 30%;">Office held</div> </div> | | |

| | |
|--|--|
| Date <div style="font-size: 1.2em;">8/16/24</div> | Payee name <div style="font-size: 1.2em;">CROSSROADS CONSULTATIVE</div> |
| Amount (\$) <div style="font-size: 1.2em;">500</div> <div style="margin-top: 5px;"> <input type="checkbox"/> Reimbursement from political contributions intended </div> | Payee address; City; State; Zip Code <div style="font-size: 1.2em;">1616 W 6th St 78703</div> |
| PURPOSE OF EXPENDITURE | <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> Category (See Categories listed at the top of this schedule) <div style="font-size: 1.2em;">Consulting Expense</div> </div> <div style="width: 48%;"> Description <div style="font-size: 1.2em;">Branding</div> </div> </div> |
| | <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. </div> <div style="width: 48%;"> <input type="checkbox"/> Check if Austin, TX, officeholder living expense </div> </div> |
| Complete ONLY if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">Candidate / Officeholder name</div> <div style="width: 30%;">Office sought</div> <div style="width: 30%;">Office held</div> </div> | |

| | |
|--|---|
| Date | Payee name |
| Amount (\$) <div style="margin-top: 5px;"> <input type="checkbox"/> Reimbursement from political contributions intended </div> | Payee address; City; State; Zip Code |
| PURPOSE OF EXPENDITURE | <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> Category (See Categories listed at the top of this schedule) </div> <div style="width: 48%;"> Description </div> </div> |
| | <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. </div> <div style="width: 48%;"> <input type="checkbox"/> Check if Austin, TX, officeholder living expense </div> </div> |
| Complete ONLY if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">Candidate / Officeholder name</div> <div style="width: 30%;">Office sought</div> <div style="width: 30%;">Office held</div> </div> | |

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