

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: 368
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Gina	MI O	OFFICE USE ONLY	
	NICKNAME	LAST Jones	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 12246 San Antonio TX 78212				Date Received 4/3/2025 5:12:48PM
	AREA CODE (210)	PHONE NUMBER 549-6384	EXTENSION		
5 CANDIDATE / OFFICEHOLDER PHONE					Date Hand-delivered or Date Postmarked
	AREA CODE (210)	PHONE NUMBER 549-6384	EXTENSION		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Amanda	MI L	Receipt #	Amount \$
	NICKNAME	LAST Keammerers	SUFFIX	Date Processed 4/3/2025 5:12:48PM	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE PO Box 12246 San Antonio TX 78212				
8 CAMPAIGN TREASURER PHONE	AREA CODE (210)	PHONE NUMBER 549-6384	EXTENSION		
9 REPORT TYPE	30th Day Before General Election				
10 PERIOD COVERED	Month Day Year 1/1/2025			Month Day Year THROUGH 3/24/2025	
11 ELECTION	ELECTION DATE Month Day Year 5/3/2025	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special Description _____			
12 OFFICE	OFFICE HELD (if any) none			13 OFFICE SOUGHT (if known) Mayor	
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Gina O Jones		15 Filer ID (Ethics Commission Filers)
16 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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS
17 CONTRIBUTION TOTALS EXPENDITURE TOTALS CONTRIBUTION BALANCE OUTSTANDING LOAN TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 20.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 167319.07
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 239298.65
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 49703.00
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0
18 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.		
* * * Electronically Certified * * *		
Signature of Candidate or Officeholder		
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the said <u>Gina O Jones</u> this the <u>3rd</u> day of <u>April</u> , 2025, 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

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

19 FILER NAME Gina O Jones	20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 167319.07
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 239298.65
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10. <input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11. <input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 1 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/1/2025	5 Full name of contributor Mark Freeland	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.25
6 Contributor address; 6737 NW Northridge Ln Bremerton, WA 98312			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/2/2025	Full name of contributor Julio Chiu	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 801 Rosinante Rd El Paso, TX 79922			City; State; Zip Code
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) Turnstone Investments	
Date 1/3/2025	Full name of contributor Tom Connelly	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 3156 Brookhollow Dr Dallas, TX 75234			City; State; Zip Code
Principal occupation / Job title (See instructions) Advisor		Employer (See instructions) Contran Corp	
Date 1/3/2025	Full name of contributor Lynne W Perry	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 4419 Hilton Head St San Antonio, TX 78217			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 2 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/3/2025	5 Full name of contributor Gail Reinhart	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 215 Center St Apt 1407 San Antonio, TX 78202			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/4/2025	Full name of contributor John Moll	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 4633 Caritina Dr Tarzana, CA 91356			City; State; Zip Code
Principal occupation / Job title (See instructions) Administrator		Employer (See instructions) Childrens Law Center	
Date 1/6/2025	Full name of contributor Valerie Ploumpis	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 150.00
Contributor address; 2328 Champlain St NW Apt 101 Washington, DC 20009			City; State; Zip Code
Principal occupation / Job title (See instructions) National Policy Director		Employer (See instructions) Equality California	
Date 1/6/2025	Full name of contributor Dorothea Leicher	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 411 Walnut St # 11100 Green Cove Springs, FL 32043			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 3 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/6/2025	5 Full name of contributor Stephen Mahle	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 1410 Spring Valley Rd Minneapolis, MN 55422			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/6/2025	Full name of contributor Edward Main	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 2031 Branard St Houston, TX 77098			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/6/2025	Full name of contributor Glen Maxey	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 5200 Guadalupe St Austin, TX 78751			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/6/2025	Full name of contributor Eva Mendoza	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 930 Country Mdws San Antonio, TX 78253			City; State; Zip Code
Principal occupation / Job title (See instructions) Chief Technology Officer		Employer (See instructions) San Antonio ISD	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 4 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/6/2025	5 Full name of contributor Caroline Miller	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 7541 SW 52nd Ct Miami, FL 33143			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/6/2025	Full name of contributor Michael Sonnenfeldt	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 145 Central Park W New York, NY 10023			City; State; Zip Code
Principal occupation / Job title (See instructions) investor		Employer (See instructions) self	
Date 1/6/2025	Full name of contributor Sarah Cowen	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 801 W Jonquil Ave Mcallen, TX 78501			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Cowen	
Date 1/6/2025	Full name of contributor Jessica Weldon	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 3525 Galena Hills Loop Round Rock, TX 78681			City; State; Zip Code
Principal occupation / Job title (See instructions) Training Director		Employer (See instructions) Arena	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 5 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/6/2025	5 Full name of contributor Chet Atkins	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 1000.00
	6 Contributor address; 11 Depot Rd Hancock, NH 03449	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Govt Affairs		9 Employer (See instructions) Tremont Strategies Group LLC	
Date 1/6/2025	Full name of contributor Belinda Garza Hartwig	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
	Contributor address; 9000 2nd Ave Silver Spring, MD 20910	City; State; Zip Code	
Principal occupation / Job title (See instructions) Government Affairs		Employer (See instructions) Instacart	
Date 1/6/2025	Full name of contributor Alan Zimmerman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 150.00
	Contributor address; 8716 Bellanca Dr Austin, TX 78738	City; State; Zip Code	
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) A.L. Zimmerman Capital LP	
Date 1/6/2025	Full name of contributor Beat The Odds	<input checked="" type="checkbox"/> out-of-state PAC (ID# C00721233)	Amount of contribution (\$) 1000.00
	Contributor address; 5130 S Fort Apache Rd Ste Pm 215 Las Vegas, NV 89148	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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 6 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/7/2025	5 Full name of contributor Seth Hulkower	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 222 Park Ave S New York, NY 10003			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/7/2025	Full name of contributor Fred Block	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 42 Plaza Dr Berkeley, CA 94705			City; State; Zip Code
Principal occupation / Job title (See instructions) retired		Employer (See instructions) retired	
Date 1/7/2025	Full name of contributor Walker Colston	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 7309 Davenport Rd Goleta, CA 93117			City; State; Zip Code
Principal occupation / Job title (See instructions) Executive		Employer (See instructions) Keysight	
Date 1/7/2025	Full name of contributor Theda Skocpol	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 150.00
Contributor address; 66 Huron Ave Cambridge, MA 02138			City; State; Zip Code
Principal occupation / Job title (See instructions) Professor		Employer (See instructions) Harvard University	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 7 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/7/2025	5 Full name of contributor Timothy Rabroker	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 893 Shaw Ln Killeen, TX 76542			
8 Principal occupation / Job title (See instructions) Firefighter		9 Employer (See instructions) City of Killeen	
Date 1/7/2025	Full name of contributor Robert Shor	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 720.00
Contributor address; 2824 Jutland Rd Kensington, MD 20895			
Principal occupation / Job title (See instructions) Cardiologist		Employer (See instructions) Virginia Health	
Date 1/7/2025	Full name of contributor Walter Slocombd	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 4000 Tunlaw Rd NW Apt 816 Washington, DC 20007			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/7/2025	Full name of contributor Rosemary Lesser	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 5273 Skyline Pkwy Ogden, UT 84403			
Principal occupation / Job title (See instructions) Legislator		Employer (See instructions) State of Utah	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 8 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/8/2025	5 Full name of contributor Victor Paci	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 516 Tremont St Boston, MA 02116			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Finance		9 Employer (See instructions) EquityResourcesInc	
Date 1/8/2025	Full name of contributor Piper Nelson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 3206 Harris Park Ave Austin, TX 78705			City; State; Zip Code
Principal occupation / Job title (See instructions) Executive Director		Employer (See instructions) I Live Here I Give Here	
Date 1/8/2025	Full name of contributor Neva Purnell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Contributor address; 3014 Windsor Rd Austin, TX 78703			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/8/2025	Full name of contributor Jeremy Smith	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 3911 Vaughan St Austin, TX 78723			City; State; Zip Code
Principal occupation / Job title (See instructions) Technology		Employer (See instructions) Civitech	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 9 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/8/2025	5 Full name of contributor Ranada Stephenson	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 475 EI Centro Rd Hillsborough, CA 94010			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/8/2025	Full name of contributor Richard Connell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 11704 Hobbiton Trl Austin, TX 78739			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 1/8/2025	Full name of contributor Rosemary Abriam	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 750.00
Contributor address; 1681 Fluorite Ct Livermore, CA 94550			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/9/2025	Full name of contributor Lynn & Darlene Clark	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 3201 Bandera St Athens, TX 75752			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 10 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/9/2025	5 Full name of contributor John Codella Jr	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 9183 Alister Dr Melbourne, FL 32940			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/9/2025	Full name of contributor Margaret Carter	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 213 Newbury Ter San Antonio, TX 78209			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/9/2025	Full name of contributor Stacie Hare	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 18713 Brookwood Frst San Antonio, TX 78258			
Principal occupation / Job title (See instructions) Managing Director of Impact		Employer (See instructions) City Year	
Date 1/9/2025	Full name of contributor Elizabeth Harris	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; PO Box 2680 Evergreen, CO 80437			
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Elizabeth Harris	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 11 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/9/2025	5 Full name of contributor Mark Freeland	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 5.00
6 Contributor address; 6737 NW Northridge Ln Bremerton, WA 98312			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/9/2025	Full name of contributor Jacqueline Delmont	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 620 W 42nd St Apt S59C New York, NY 10036			City; State; Zip Code
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) Delmont Medical Care	
Date 1/9/2025	Full name of contributor Richard Elledge	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 118 Brightwood PI San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) physician		Employer (See instructions) State of Texas	
Date 1/9/2025	Full name of contributor Lanae Erickson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 621 Gresham PI NW Washington, DC 20001			City; State; Zip Code
Principal occupation / Job title (See instructions) Lawyer		Employer (See instructions) Third Way	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 12 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/9/2025	5 Full name of contributor Raymond Fisk	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 2710 Summit Ridge Dr San Marcos, TX 78666			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Professor		9 Employer (See instructions) Texas State University	
Date 1/9/2025	Full name of contributor Philip Walker	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 3731 Van Ness Ln Dallas, TX 75220			City; State; Zip Code
Principal occupation / Job title (See instructions) Real Estate Sales		Employer (See instructions) Keller Williams Realty	
Date 1/9/2025	Full name of contributor Jan Reed	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 2268 E Walnut St Evansville, IN 47714			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/9/2025	Full name of contributor Barry Nall	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; PO Box 205 Comfort, TX 78013			City; State; Zip Code
Principal occupation / Job title (See instructions) not employed		Employer (See instructions) none	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 13 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/10/2025	5 Full name of contributor Jenny Tolan	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 65 S Elliott Pl Brooklyn, NY 11217			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/10/2025	Full name of contributor Beth Francell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; PO Box 2176 Fort Davis, TX 79734			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 1/11/2025	Full name of contributor Christi Jones	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 1103 Coe Dr San Antonio, TX 78251			City; State; Zip Code
Principal occupation / Job title (See instructions) Instructor		Employer (See instructions) Navy	
Date 1/11/2025	Full name of contributor Vanessa Perez-King	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 11310 Fair Hollow Dr San Antonio, TX 78249			City; State; Zip Code
Principal occupation / Job title (See instructions) Senior Product Owner		Employer (See instructions) USAA	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 14 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/11/2025	5 Full name of contributor Mark Blitzer	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 10412 Somerton Dr Dallas, TX 75229			City; State; Zip Code
8 Principal occupation / Job title (See instructions) PwC		9 Employer (See instructions) Director	
Date 1/12/2025	Full name of contributor David Vernal	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 2277 Bryant St Palo Alto, CA 94301			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/12/2025	Full name of contributor Dorothea Leicher	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 411 Walnut St # 11100 Green Cove Springs, FL 32043			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/13/2025	Full name of contributor Victor Perry	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 2177 3rd St Unit 514 San Francisco, CA 94107			City; State; Zip Code
Principal occupation / Job title (See instructions) Data Scientist		Employer (See instructions) Autodesk	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 15 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/13/2025	5 Full name of contributor Stephen Skinner	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code PO Box 366 Shepherdstown, WV 25443			
8 Principal occupation / Job title (See instructions) Lawyer		9 Employer (See instructions) Skinner Law Firm	
Date 1/13/2025	Full name of contributor Allison Binder	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 24829 Jacob Hamblin Rd Hidden Hills, CA 91302			
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Ggssc	
Date 1/13/2025	Full name of contributor William Sr. Harris	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; City; State; Zip Code 1010 Waltham St Lexington, MA 02421			
Principal occupation / Job title (See instructions) MD		Employer (See instructions) Mass General Hospital	
Date 1/13/2025	Full name of contributor Diane Hartley	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 5401 W Mockingbird Ln Dallas, TX 75209			
Principal occupation / Job title (See instructions) GM		Employer (See instructions) McKissock	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 16 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/14/2025	5 Full name of contributor Robert Holleyman	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 150.00
6 Contributor address; 345 Garcia St Santa Fe, NM 87501			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/14/2025	Full name of contributor Joseph Jolly	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 1161 Boylston St Newton, MA 02464			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney / Administrator		Employer (See instructions) Wellan	
Date 1/14/2025	Full name of contributor Bears Rebecca Fonte	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 375.00
Contributor address; 13225 Hymeadow Cir Austin, TX 78729			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/14/2025	Full name of contributor Allen Blue	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 750 N San Vicente Blvd Ste 800W West Hollywood, CA 90069			City; State; Zip Code
Principal occupation / Job title (See instructions) Cofounder		Employer (See instructions) LinkedIn	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 17 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/14/2025	5 Full name of contributor Meina Banh	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 4504 15th St NW Washington, DC 20011			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Advisor		9 Employer (See instructions) CFPB	
Date 1/14/2025	Full name of contributor Serena Roosevelt	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 28 Bergen St Brooklyn, NY 11201			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/14/2025	Full name of contributor Meryl R Obryan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 4111 Old Mill Rd Alexandria, VA 22309			City; State; Zip Code
Principal occupation / Job title (See instructions) Vice President		Employer (See instructions) Lake Research Partners	
Date 1/14/2025	Full name of contributor Paulo Pontemayor	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 750.00
Contributor address; 1111 S St NW Washington, DC 20009			City; State; Zip Code
Principal occupation / Job title (See instructions) Senior Director		Employer (See instructions) CHA	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 18 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/14/2025	5 Full name of contributor Gregg Orton	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 1215 1 St SE Washington, DC 20003			
8 Principal occupation / Job title (See instructions) National Director		9 Employer (See instructions) Natl Council Asian Pacific Americans (NCAPA)	
Date 1/14/2025	Full name of contributor Mary Lu Murphy	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 244 Avalon Dr Pacifica, CA 94044			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/14/2025	Full name of contributor Andrew Lazarus	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 2745 Elmwood Ave Berkeley, CA 94705			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/14/2025	Full name of contributor Wendy Krispin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 528 S Hall St Dallas, TX 75226			
Principal occupation / Job title (See instructions) caterer/ president		Employer (See instructions) wendy krispin caterer	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 19 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/14/2025	5 Full name of contributor Louis Lambert	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 1000.00
6 Contributor address; 4717 White Settlement Rd Fort Worth, TX 76114			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Investments		9 Employer (See instructions) Self	
Date 1/14/2025	Full name of contributor Kathleen McCarthy	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 46 Holyrood Ave Lowell, MA 01852			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/15/2025	Full name of contributor Mary B Lockhart	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 107 E Lockhart Ave Alpine, TX 79830			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/15/2025	Full name of contributor Lori Logan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 3510 Hunters Sound St San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 20 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/15/2025	5 Full name of contributor Jer-Adrienne Lelliott	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 125.00
6 Contributor address; 1060 E Orange Grove Blvd Apt 1 Pasadena, CA 91104			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Executive Director		9 Employer (See instructions) Newcomers Access Center	
Date 1/15/2025	Full name of contributor Timothy Rabroker	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 2.00
Contributor address; 893 Shaw Ln Killeen, TX 76542			City; State; Zip Code
Principal occupation / Job title (See instructions) Firefighter		Employer (See instructions) City of Killeen	
Date 1/15/2025	Full name of contributor Betty Siegrist	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 2255 Charnelton St Eugene, OR 97405			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/15/2025	Full name of contributor Bernadette Lewis	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 4827 El Gusto St San Antonio, TX 78233			City; State; Zip Code
Principal occupation / Job title (See instructions) Marketing manager		Employer (See instructions) Strategic Education Inc	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 21 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/15/2025	5 Full name of contributor Neil Giuliano	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 21 E 13th St Tempe, AZ 85281			City; State; Zip Code
8 Principal occupation / Job title (See instructions) President & CEO		9 Employer (See instructions) Greater Phoenix Leadership	
Date 1/15/2025	Full name of contributor Kim Hunt	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 5514 S Woodlawn Ave Chicago, IL 60637			City; State; Zip Code
Principal occupation / Job title (See instructions) Advocate		Employer (See instructions) AIDS Foundation of Chicago	
Date 1/15/2025	Full name of contributor Amanda Keammerer	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 244 Barrett PI San Antonio, TX 78225			City; State; Zip Code
Principal occupation / Job title (See instructions) self employed		Employer (See instructions) Javilud	
Date 1/15/2025	Full name of contributor Renata Hesse	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 1307 P St NW Washington, DC 20005			City; State; Zip Code
Principal occupation / Job title (See instructions) Lawyer		Employer (See instructions) Sullivan & Cromwell	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			<p>1 Total pages Schedule A1: 22 of 298</p>
<p>2 FILER NAME Gina O Jones</p>			<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 Date 1/15/2025</p>	<p>5 Full name of contributor David Woodard</p>	<p><input type="checkbox"/> out-of-state PAC (ID#_____)</p>	<p>7 Amount of contribution (\$) 7.00</p>
<p>6 Contributor address; 2018 Griffith Park Blvd Apt 117 Los Angeles, CA 90039</p>			
<p>8 Principal occupation / Job title (See instructions) Not employed</p>		<p>9 Employer (See instructions) Not employed</p>	
<p>Date 1/16/2025</p>	<p>Full name of contributor Jackie Wetzel</p>	<p><input type="checkbox"/> out-of-state PAC (ID#_____)</p>	<p>Amount of contribution (\$) 25.00</p>
<p>Contributor address; 401 12th St S Apt 417 Arlington, VA 22202</p>			
<p>Principal occupation / Job title (See instructions) Campaign specialist</p>		<p>Employer (See instructions) NEA</p>	
<p>Date 1/16/2025</p>	<p>Full name of contributor Celestina E R Hidalgo</p>	<p><input type="checkbox"/> out-of-state PAC (ID#_____)</p>	<p>Amount of contribution (\$) 10.00</p>
<p>Contributor address; 21522 Promontory Cir San Antonio, TX 78258</p>			
<p>Principal occupation / Job title (See instructions) Partner</p>		<p>Employer (See instructions) Transcend</p>	
<p>Date 1/16/2025</p>	<p>Full name of contributor Nancy Handel</p>	<p><input type="checkbox"/> out-of-state PAC (ID#_____)</p>	<p>Amount of contribution (\$) 7.00</p>
<p>Contributor address; 26210 Sunny Mdw San Antonio, TX 78260</p>			
<p>Principal occupation / Job title (See instructions) Not Employed</p>		<p>Employer (See instructions) Not Employed</p>	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 23 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/16/2025	5 Full name of contributor Noah Krawitz	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 87 Ivy St Brookline, MA 02446			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Principal		9 Employer (See instructions) Pinpoint Campaigns	
Date 1/16/2025	Full name of contributor Sally Greenberg	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 4406 35th St NW Washington, DC 20008			City; State; Zip Code
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) NCL	
Date 1/16/2025	Full name of contributor Mark Freeland	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 12.25
Contributor address; 6737 NW Northridge Ln Bremerton, WA 98312			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/16/2025	Full name of contributor Jerry Duterroil	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 702 Lost Cyn San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 24 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/16/2025	5 Full name of contributor Brian Card	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 1111 S St NW Washington, DC 20009			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/16/2025	Full name of contributor Shelley Rubin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 502 Park Ave Ph 25 New York, NY 10022			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/16/2025	Full name of contributor Benjamin Ray	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 643 5th St NE Washington, DC 20002			
Principal occupation / Job title (See instructions) Department Director		Employer (See instructions) SCDP	
Date 1/16/2025	Full name of contributor Eliot Tucker	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 2199 Troon Rd Houston, TX 77019			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 25 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/16/2025	5 Full name of contributor Phil Walsh	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; PO Box 56178 Portland, OR 97238			
8 Principal occupation / Job title (See instructions) lawyer		9 Employer (See instructions) self	
Date 1/16/2025	Full name of contributor David Smith	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 8250 Cruiseship Bay Unit 705 San Antonio, TX 78255			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/16/2025	Full name of contributor Jude Soundar	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 220 20th St S Arlington, VA 22202			
Principal occupation / Job title (See instructions) Government Affairs		Employer (See instructions) Microsoft	
Date 1/16/2025	Full name of contributor Stephen Maniin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 3.00
Contributor address; 427 Peggy Dr San Antonio, TX 78219			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 26 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/16/2025	5 Full name of contributor William OBrien	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 5.00
6 Contributor address; City; State; Zip Code 3838 Lockhill Selma Rd Apt 314 San Antonio, TX 78230			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/17/2025	Full name of contributor Theresa Poenisch	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 223 Laurel Heights PI San Antonio, TX 78212			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/17/2025	Full name of contributor David Pierce	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; City; State; Zip Code 260 W End Ave Ph B New York, NY 10023			
Principal occupation / Job title (See instructions) actor/director		Employer (See instructions) Hamsterhead Inc	
Date 1/17/2025	Full name of contributor Dorothea Leicher	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; City; State; Zip Code 411 Walnut St # 11100 Green Cove Springs, FL 32043			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 27 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/17/2025	5 Full name of contributor Daphne Domingo	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 2107 Hardbower Way Alexandria, VA 22303			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Manager		9 Employer (See instructions) Elliott Management	
Date 1/17/2025	Full name of contributor Marvin Dejear	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 715 Rio Spgs San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/17/2025	Full name of contributor Harris Kempner	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; PO Box 119 Galveston, TX 77553			City; State; Zip Code
Principal occupation / Job title (See instructions) money manager		Employer (See instructions) kempner capital management	
Date 1/17/2025	Full name of contributor Sandra Keyser	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 26 Denbury Gln San Antonio, TX 78257			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 28 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/18/2025	5 Full name of contributor Barry Gilbert	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 130 Runnymede Rd Rochester, NY 14618			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/18/2025	Full name of contributor Peter Curtin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 809 Lamplight Dr La Jolla, CA 92037			City; State; Zip Code
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) City of Hope	
Date 1/18/2025	Full name of contributor Cynthia Langston	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 1106 W Magnolia Ave San Antonio, TX 78201			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/18/2025	Full name of contributor Neil O'Donnell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 1009 E State St Traverse City, MI 49686			City; State; Zip Code
Principal occupation / Job title (See instructions) self		Employer (See instructions) psychologist	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 29 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/19/2025	5 Full name of contributor Cynthia Rankin	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 9351 Bianca San Antonio, TX 78254			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/19/2025	Full name of contributor Carol Handwerker	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 3335 Military Rd NW Washington, DC 20015			
Principal occupation / Job title (See instructions) Professor		Employer (See instructions) Purdue University	
Date 1/20/2025	Full name of contributor Gina Fant-Simon	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 204 Winchester Dr Dripping Springs, TX 78620			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/20/2025	Full name of contributor Nick Boris	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 212 Vista Ln Georgetown, TX 78633			
Principal occupation / Job title (See instructions) VP		Employer (See instructions) Cox Automotive	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 30 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/20/2025	5 Full name of contributor Joel Reyes	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 1000.00
6 Contributor address; 238 W Kings Hwy San Antonio, TX 78212			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Physician		9 Employer (See instructions) STAAMP	
Date 1/20/2025	Full name of contributor Cynthia Schwart	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Contributor address; 3845 Ranch Road 2222 Apt 4 Austin, TX 78731			City; State; Zip Code
Principal occupation / Job title (See instructions) Executive Assistant		Employer (See instructions) Garry Mauro	
Date 1/21/2025	Full name of contributor Lisa Robinson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 7813 Maple Ridge Rd Bethesda, MD 20814			City; State; Zip Code
Principal occupation / Job title (See instructions) Psychotherapist		Employer (See instructions) Self	
Date 1/21/2025	Full name of contributor Marian Weeks	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 901 Maine St Lawrence, KS 66044			City; State; Zip Code
Principal occupation / Job title (See instructions) manager		Employer (See instructions) self-employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 31 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/21/2025	5 Full name of contributor Thomas Nelson	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 27.00
6 Contributor address; PO Box 222 La Pointe, WI 54850			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/21/2025	Full name of contributor Carol Mukhopadhyay	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 30 W Point PI San Mateo, CA 94402			City; State; Zip Code
Principal occupation / Job title (See instructions) research-consulting		Employer (See instructions) self	
Date 1/21/2025	Full name of contributor Charles Boyer	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 3612 Meridian Gardens Dr Louisville, KY 40241			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/21/2025	Full name of contributor Susan Byrne	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 2300 Wolf St Unit 21B Dallas, TX 75201			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 32 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/21/2025	5 Full name of contributor Gabriel Catone	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 1000.00
6 Contributor address; 274 W 11th St New York, NY 10014			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Art consultant		9 Employer (See instructions) Ruth Catone	
Date 1/21/2025	Full name of contributor Kim Cauthorn	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 314 W Elsmere PI San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Willis Towers Watson	
Date 1/21/2025	Full name of contributor Clark Childers	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; PO Box 1367 Marfa, TX 79843			City; State; Zip Code
Principal occupation / Job title (See instructions) Real Estate		Employer (See instructions) Self	
Date 1/21/2025	Full name of contributor Joyce Clements	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 50 Sunny Oaks Dr San Rafael, CA 94903			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 33 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/21/2025	5 Full name of contributor Marc Agger	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
	6 Contributor address; 5 Montague Ter Brooklyn, NY 11201	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Business person		9 Employer (See instructions) Brooklyn Fish Transfer	
Date 1/21/2025	Full name of contributor Dilip Kamat	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
	Contributor address; 2233 Wakerobin Ln Reston, VA 20191	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 1/22/2025	Full name of contributor Martha Cigarroa	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
	Contributor address; 602 E Calton Rd Laredo, TX 78041	City; State; Zip Code	
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Person, Whitworth, Borchers & Morales, LLP	
Date 1/22/2025	Full name of contributor Wendy Davis	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
	Contributor address; 800 W 5th St Apt 505 Austin, TX 78703	City; State; Zip Code	
Principal occupation / Job title (See instructions) Senior Advisor		Employer (See instructions) Planned Parenthood Texas Votes	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 34 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/22/2025	5 Full name of contributor Carol Orr	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 5639 Willow Ln Dallas, TX 75230			City; State; Zip Code
8 Principal occupation / Job title (See instructions) publishing		9 Employer (See instructions) self	
Date 1/22/2025	Full name of contributor Richard Phelps	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Contributor address; 125 Coolidge Ave Apt 109 Watertown, MA 02472			City; State; Zip Code
Principal occupation / Job title (See instructions) Chairman		Employer (See instructions) Phelps Industries	
Date 1/22/2025	Full name of contributor Dorothea Leicher	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 411 Walnut St # 11100 Green Cove Springs, FL 32043			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/22/2025	Full name of contributor Kenneth Stevens	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 30.00
Contributor address; 7525 Weather Worn Way Unit B Columbia, MD 21046			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 35 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/22/2025	5 Full name of contributor Donna Talbott	<input type="checkbox"/> out-of-state PAC (ID# _____)	7 Amount of contribution (\$) 200.00
6 Contributor address; 2622 Crow Vly San Antonio, TX 78232			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/22/2025	Full name of contributor Sarah Rasco	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 250.00
Contributor address; 20227 Bella Sky San Antonio, TX 78256			
Principal occupation / Job title (See instructions) Medical Director		Employer (See instructions) Humana	
Date 1/22/2025	Full name of contributor Jonathan Shakes	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 500.00
Contributor address; 9211 SE 33rd St Mercer Island, WA 98040			
Principal occupation / Job title (See instructions) Instructor		Employer (See instructions) Mathnasium	
Date 1/22/2025	Full name of contributor With Honor PAC	<input checked="" type="checkbox"/> out-of-state PAC (ID# C00661272)	Amount of contribution (\$) 1000.00
Contributor address; PO Box 1843 Alexandria, VA 22313			
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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 36 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/23/2025	5 Full name of contributor Bernadette Williams	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 20.00
6 Contributor address; 10136 E Southern Ave Unit 1057 Mesa, AZ 85209			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/23/2025	Full name of contributor Destinee Serdinia	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 9116 Salfish Dr Boerne, TX 78006			
Principal occupation / Job title (See instructions) not employed		Employer (See instructions) none	
Date 1/23/2025	Full name of contributor Tracy Rothstein	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 174 Watercolor Way Ste Pm 103 Santa Rosa Beach, FL 32459			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/23/2025	Full name of contributor Randall Rockel	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 1601 Burgos Dr Sarasota, FL 34238			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 37 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/23/2025	5 Full name of contributor Greg Reed	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 1718 Chadbourne Ave Madison, WI 53726			
8 Principal occupation / Job title (See instructions) Associate Director		9 Employer (See instructions) UW-Madison	
Date 1/23/2025	Full name of contributor Charles Spurr	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 139 Broadway St Wakefield, MA 01880			
Principal occupation / Job title (See instructions) Software Engineer retired		Employer (See instructions) retired	
Date 1/23/2025	Full name of contributor Brad Veloz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 7818 Black Oak Pass San Antonio, TX 78223			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/23/2025	Full name of contributor Joey Weary	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 16007 Hickory Well Dr San Antonio, TX 78247			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 38 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/23/2025	5 Full name of contributor Steven Wallace	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 1256 Lovell View Dr Knoxville, TN 37932			City; State; Zip Code
8 Principal occupation / Job title (See instructions) 1256 Lovell View Drive		9 Employer (See instructions) not employed	
Date 1/23/2025	Full name of contributor Richard Wadkins	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 5415 Lake Howell Rd # 312 Winter Park, FL 32792			City; State; Zip Code
Principal occupation / Job title (See instructions) Merchant mariner		Employer (See instructions) Military Sealift Command	
Date 1/23/2025	Full name of contributor Starling Lawrence	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 45 E 62nd St Apt 8B New York, NY 10065			City; State; Zip Code
Principal occupation / Job title (See instructions) Editor		Employer (See instructions) W W Norton co	
Date 1/23/2025	Full name of contributor Starling Lawrence	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 45 E 62nd St Apt 8B New York, NY 10065			City; State; Zip Code
Principal occupation / Job title (See instructions) Editor		Employer (See instructions) W W Norton co	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 39 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/23/2025	5 Full name of contributor Carolyn Lamacchia	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 315 Jackson St Dayton, OH 45410			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/23/2025	Full name of contributor Dorothy Lamm	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 14.32
Contributor address; 5401 E Dakota Ave Unit 20 Denver, CO 80246			
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 1/23/2025	Full name of contributor Diane Martin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 16 Old Mill Rd East Sandwich, MA 02537			
Principal occupation / Job title (See instructions) former communication worker		Employer (See instructions) retired	
Date 1/23/2025	Full name of contributor Jimmy Martin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 129 Big Thursday Ct Chapin, SC 29036			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 40 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/23/2025	5 Full name of contributor John Mitchell	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 5405 Aurora Dr Austin, TX 78756			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/23/2025	Full name of contributor Susan Peet	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 4 Stones Throw Rd Wilmington, DE 19803			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A	
Date 1/23/2025	Full name of contributor David Plylar	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 4218 Misty Glade San Antonio, TX 78247			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/23/2025	Full name of contributor Robin Prescott	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 107 Roadrunner Trl Boerne, TX 78006			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 41 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/23/2025	5 Full name of contributor Carol Mukhopadhyay	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 30 W Point PI San Mateo, CA 94402			City; State; Zip Code
8 Principal occupation / Job title (See instructions) research-consulting		9 Employer (See instructions) self	
Date 1/23/2025	Full name of contributor Carol Mukhopadhyay	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 20.00
Contributor address; 30 W Point PI San Mateo, CA 94402			City; State; Zip Code
Principal occupation / Job title (See instructions) research-consulting		Employer (See instructions) self	
Date 1/23/2025	Full name of contributor Georgia Murray	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 1313 Washington St Boston, MA 02118			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/23/2025	Full name of contributor William OBrien	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 6.00
Contributor address; 3838 Lockhill Selma Rd Apt 314 San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 42 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/23/2025	5 Full name of contributor Jim Cousar	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 1110 W 7th St Austin, TX 78703			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Self	
Date 1/23/2025	Full name of contributor Stephen Bull	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 56 Ludlow St Apt 2 New York, NY 10002			City; State; Zip Code
Principal occupation / Job title (See instructions) Sole Member		Employer (See instructions) Breathe Global IP LLC	
Date 1/23/2025	Full name of contributor Catalina Aguirre	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 15010 Short Trl San Antonio, TX 78245			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/23/2025	Full name of contributor Lawrence Bailis	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 133 Brattle St Cambridge, MA 02138			City; State; Zip Code
Principal occupation / Job title (See instructions) Professor		Employer (See instructions) Brandeis University	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 43 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/23/2025	5 Full name of contributor Carrie Johnson	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 345 E Maine Ave Longwood, FL 32750			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/23/2025	Full name of contributor Beth Falcone	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 95.70
Contributor address; 301 West Ave Unit 2801 Austin, TX 78701			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 1/23/2025	Full name of contributor Nolan E Check	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 4.00
Contributor address; 11430 SW Clifford St Beaverton, OR 97008			City; State; Zip Code
Principal occupation / Job title (See instructions) Mask designer		Employer (See instructions) Coast to Coast Layout	
Date 1/23/2025	Full name of contributor Jerry Duterroil	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 702 Lost Cyn San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 44 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/23/2025	5 Full name of contributor Patricia Florence	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 22800 Bulverde Rd Apt 2006 San Antonio, TX 78261			
8 Principal occupation / Job title (See instructions) Teacher		9 Employer (See instructions) NEISD	
Date 1/23/2025	Full name of contributor Cassandra Dickson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 638 NW Skyline Crest Rd Portland, OR 97229			
Principal occupation / Job title (See instructions) Writer		Employer (See instructions) Self	
Date 1/23/2025	Full name of contributor Joel Friedman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 4949 Fresh Meadow Ln Apt 1 Fresh Meadows, NY 11365			
Principal occupation / Job title (See instructions) fully retired		Employer (See instructions) UC DAVIS	
Date 1/23/2025	Full name of contributor Katharine Gross	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 8.00
Contributor address; 2120 Contreras Rd NE Rio Rancho, NM 87144			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 45 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/24/2025	5 Full name of contributor Raul Gomez	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 403 Helena St San Antonio, TX 78204			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/24/2025	Full name of contributor Christopher Chavez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 20.25
Contributor address; 20007 Park Rnch San Antonio, TX 78259			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/24/2025	Full name of contributor Yvonne Pacheco	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 12110 Chi Chis Cv San Antonio, TX 78221			
Principal occupation / Job title (See instructions) CNA		Employer (See instructions) Unios	
Date 1/24/2025	Full name of contributor Abbey Mcnaughton	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 3663 Washington Ave Apt 6025 Houston, TX 77007			
Principal occupation / Job title (See instructions) Lawyer		Employer (See instructions) Susman Godfrey	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 46 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/24/2025	5 Full name of contributor Judith Weiss	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 21 Orchard St Cambridge, MA 02140			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Executive		9 Employer (See instructions) Samuel Rubin Foundation	
Date 1/24/2025	Full name of contributor Thomas Reed	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 213 Lancaster Ave Richmond, KY 40475			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/24/2025	Full name of contributor Timothy Rabroker	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 893 Shaw Ln Killeen, TX 76542			City; State; Zip Code
Principal occupation / Job title (See instructions) Firefighter		Employer (See instructions) City of Killeen	
Date 1/25/2025	Full name of contributor Raksana Abdurakhmanova	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 45 Stuart St Boston, MA 02116			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 47 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/25/2025	5 Full name of contributor Andrew Biggio	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 22 Crowninshield Rd Marblehead, MA 01945			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Insurance		9 Employer (See instructions) First Indemnity	
Date 1/25/2025	Full name of contributor Mark Freeland	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 12.25
Contributor address; 6737 NW Northridge Ln Bremerton, WA 98312			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/25/2025	Full name of contributor Laura Wilder	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 4905 Rollingwood Ct Garland, TX 75043			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 1/26/2025	Full name of contributor Loma Griffith	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 1170 N San Marcos Rd Santa Barbara, CA 93111			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 48 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/26/2025	5 Full name of contributor Jean King	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 4205 Colgate Way Livermore, CA 94550			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/26/2025	Full name of contributor James Kotchmar	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 10 Woodlake Dr Thiells, NY 10984			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/26/2025	Full name of contributor Teresa Barnes	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 17681 Sunset Way Sonoma, CA 95476			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 1/26/2025	Full name of contributor Sarah Cowen	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 801 W Jonquil Ave Mcallen, TX 78501			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Cowen	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 49 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/26/2025	5 Full name of contributor Kathy Cronkite	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 15.00
6 Contributor address; PO Box 5261 Austin, TX 78763			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/26/2025	Full name of contributor Bob Wheeler	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 4946 Tinderbox Cir Manlius, NY 13104			
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 1/26/2025	Full name of contributor Charles Spurr	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 139 Broadway St Wakefield, MA 01880			
Principal occupation / Job title (See instructions) Software Engineer retired		Employer (See instructions) retired	
Date 1/26/2025	Full name of contributor Kathryn Smith-Connell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 7067 N Ashland Blvd Chicago, IL 60626			
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 50 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/26/2025	5 Full name of contributor Mary Ann Mcgonigle	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 126 W 11th St Apt 43 New York, NY 10011			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/26/2025	Full name of contributor Asla Marc Funderburk	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 6105 Shorewood Dr Arlington, TX 76016			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/26/2025	Full name of contributor Robert Langston	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 1106 W Magnolia Ave San Antonio, TX 78201			City; State; Zip Code
Principal occupation / Job title (See instructions) Teacher		Employer (See instructions) BASIS	
Date 1/26/2025	Full name of contributor Carol Pines	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 9538 Millers Rdg San Antonio, TX 78239			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 51 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/26/2025	5 Full name of contributor Frances G Pepper	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 233 Oliver Rd Cincinnati, OH 45215			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/26/2025	Full name of contributor Thomas Nelson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 27.00
Contributor address; PO Box 222 La Pointe, WI 54850			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/26/2025	Full name of contributor Mary Morris	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 20.00
Contributor address; PO Box 99 Eagle, AK 99738			City; State; Zip Code
Principal occupation / Job title (See instructions) jeweler		Employer (See instructions) self	
Date 1/27/2025	Full name of contributor Anna Moskowitz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 777 5th Ave N Naples, FL 34102			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 52 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/27/2025	5 Full name of contributor Julie Werner-Simon	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 57.57
6 Contributor address; 2530 Wilshire Blvd Fl 3 Santa Monica, CA 90403			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/27/2025	Full name of contributor Shari Weiner	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 900 Park Ave Apt 17D New York, NY 10075			City; State; Zip Code
Principal occupation / Job title (See instructions) attorney		Employer (See instructions) Murphy McKeon PC	
Date 1/27/2025	Full name of contributor Shari Weiner	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 900 Park Ave Apt 17D New York, NY 10075			City; State; Zip Code
Principal occupation / Job title (See instructions) attorney		Employer (See instructions) Murphy McKeon PC	
Date 1/27/2025	Full name of contributor Regina Todd	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 20.00
Contributor address; 18 B Chance St Devens, MA 01434			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 53 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/27/2025	5 Full name of contributor Maje Brennan	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; City; State; Zip Code 411 Walnut St. Green Cove Springs, FL 32043			
8 Principal occupation / Job title (See instructions) Author		9 Employer (See instructions) Self	
Date 1/27/2025	Full name of contributor Michael Baland	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 10467 Tippecanoe San Antonio, TX 78245			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/27/2025	Full name of contributor Joseph Sheppard	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 900.00
Contributor address; City; State; Zip Code PO Box 327 Cuero, TX 77954			
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Self	
Date 1/27/2025	Full name of contributor Claude Hersh	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 1 Hanson Pl Apt 22F Brooklyn, NY 11243			
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) NYSUT	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 54 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/27/2025	5 Full name of contributor Melba Domingo	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
	6 Contributor address; 112 Long Bow Rd Shavano Park, TX 78231	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired	
Date 1/28/2025	Full name of contributor Mitchell Draizin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
	Contributor address; 72 Fourteen Hills Ct Sag Harbor, NY 11963	City; State; Zip Code	
Principal occupation / Job title (See instructions) Real Estate Finance		Employer (See instructions) LVCA Inc	
Date 1/28/2025	Full name of contributor Amy L. Katz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
	Contributor address; 145 Central Park W Apt 3A New York, NY 10023	City; State; Zip Code	
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Self	
Date 1/28/2025	Full name of contributor Pedro Villarreal	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
	Contributor address; 324 Hoot Owl Hollow Rd Ingram, TX 78025	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 55 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/28/2025	5 Full name of contributor John Blendell	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 3335 Military Rd NW Washington, DC 20015			City; State; Zip Code
8 Principal occupation / Job title (See instructions) professor		9 Employer (See instructions) Purdue University	
Date 1/28/2025	Full name of contributor Helen Bryan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 2011 Lakeshore Dr Austin, TX 78746			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 1/28/2025	Full name of contributor Kim Cauthorn	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 314 W Elsmere Pl San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Willis Towers Watson	
Date 1/28/2025	Full name of contributor Bettie Cartwright	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 3711 San Felipe St Unit 14A Houston, TX 77027			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 56 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/28/2025	5 Full name of contributor Mandy Dealey	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 901 W 9th St Apt 405 Austin, TX 78703			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/28/2025	Full name of contributor Marjorie Tiven	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 15 W 81st St New York, NY 10024			
Principal occupation / Job title (See instructions) non-profit president		Employer (See instructions) Global Cities Inc.	
Date 1/28/2025	Full name of contributor Angela Trahan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 535 Lovett Blvd Houston, TX 77006			
Principal occupation / Job title (See instructions) Professor		Employer (See instructions) Gallaudet University	
Date 1/28/2025	Full name of contributor Timothy Rabroker	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 2.00
Contributor address; 893 Shaw Ln Killeen, TX 76542			
Principal occupation / Job title (See instructions) Firefighter		Employer (See instructions) City of Killeen	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 57 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/28/2025	5 Full name of contributor Dawn Smalls	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 30 W 13th St Apt 6C New York, NY 10011			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Jenner and Block	
Date 1/28/2025	Full name of contributor Norrie Nakawatase	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 11124 Cobalt Dr Aubrey, TX 76227			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 1/28/2025	Full name of contributor William OBrien	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 3838 Lockhill Selma Rd Apt 314 San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/28/2025	Full name of contributor Linda Lucasey	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 4721 Kincaid St Pittsburgh, PA 15224			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 58 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/28/2025	5 Full name of contributor Colin Wright	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 2823 S Palm Canyon Dr Palm Springs, CA 92264			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Self Employed	
Date 1/29/2025	Full name of contributor Dorothea Leicher	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 411 Walnut St # 11100 Green Cove Springs, FL 32043			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/29/2025	Full name of contributor Jeremy Platt	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Contributor address; 2265 Bowdoin St Palo Alto, CA 94306			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/29/2025	Full name of contributor David Sailer	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 150.00
Contributor address; 223 Valley Rd Montclair, NJ 07042			City; State; Zip Code
Principal occupation / Job title (See instructions) union rep		Employer (See instructions) SEIU	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 59 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/29/2025	5 Full name of contributor Joshua Saltman	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 1000.00
	6 Contributor address; 239 S Wilton PI Los Angeles, CA 90004	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) attorney		9 Employer (See instructions) disney	
Date 1/29/2025	Full name of contributor Neva Purnell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 150.00
	Contributor address; 3014 Windsor Rd Austin, TX 78703	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/29/2025	Full name of contributor Jill Reilly	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
	Contributor address; 621 E 1st St Apt D2 South Boston, MA 02127	City; State; Zip Code	
Principal occupation / Job title (See instructions) PR		Employer (See instructions) Denterlein	
Date 1/29/2025	Full name of contributor Karen Twitchell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
	Contributor address; 9 Courtlandt PI Houston, TX 77006	City; State; Zip Code	
Principal occupation / Job title (See instructions) Self-employed		Employer (See instructions) self-employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 60 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/29/2025	5 Full name of contributor Michael Tapia	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 5006 Casa Grande St San Antonio, TX 78233			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/29/2025	Full name of contributor Gregory Cendana	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 840 Yuma St SE Washington, DC 20032			City; State; Zip Code
Principal occupation / Job title (See instructions) President		Employer (See instructions) Cant Stop! Wont Stop! Consulting	
Date 1/29/2025	Full name of contributor Weston Loegering	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 8378 San Fernando Way Dallas, TX 75218			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/29/2025	Full name of contributor Anne Adkins	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 138 Knibbe Ave San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 61 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/29/2025	5 Full name of contributor Ronald Katz	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 20.00
6 Contributor address; PO Box 410 Saint Helena, CA 94574			
8 Principal occupation / Job title (See instructions) real estate investor		9 Employer (See instructions) self	
Date 1/30/2025	Full name of contributor Carol Hepburn	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; PO Box 17709 Seattle, WA 98127			
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Self	
Date 1/30/2025	Full name of contributor Mandy Dealey	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 901 W 9th St Apt 405 Austin, TX 78703			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/30/2025	Full name of contributor Ann Leviton	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 701 Snowy Plain Rd Fort Collins, CO 80525			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 62 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/30/2025	5 Full name of contributor Jane Condon 6 Contributor address; 38 Close Rd Greenwich, CT 06831	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) comedian		9 Employer (See instructions) self-employed	
Date 1/30/2025	Full name of contributor Jill Bernard Contributor address; 200 E 71st St Apt 8H New York, NY 10021	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Principal occupation / Job title (See instructions) RE		Employer (See instructions) NA	
Date 1/30/2025	Full name of contributor Walker Colston Contributor address; 7309 Davenport Rd Goleta, CA 93117	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) Executive		Employer (See instructions) Keysight	
Date 1/30/2025	Full name of contributor Jason Collins Contributor address; 12639 Promontory Rd Los Angeles, CA 90049	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Principal occupation / Job title (See instructions) NBA Cares Ambassador		Employer (See instructions) NBA	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 63 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/30/2025	5 Full name of contributor Robert Rothen	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 9926 Cominsky Park San Antonio, TX 78250			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/30/2025	Full name of contributor Faye Sheppard	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; PO Box 327 Cuero, TX 77954			
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) Patient Safety Resources	
Date 1/30/2025	Full name of contributor Cynthia Payne	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 69 Wisteria Dr Oakwood, OH 45419			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/30/2025	Full name of contributor Marita Navarro	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 4327 Bloomdale San Antonio, TX 78218			
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 64 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/30/2025	5 Full name of contributor Ted Lyon	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 1000.00
6 Contributor address; City; State; Zip Code 18601 Lyndon B Johnson Fwy Ste 525 Mesquite, TX 75150			
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Ted B. Lyon & Associates P.C.	
Date 1/30/2025	Full name of contributor Ryan Merket	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 6532 Needham Ln Austin, TX 78739			
Principal occupation / Job title (See instructions) Angel Investor		Employer (See instructions) Microsoft	
Date 1/31/2025	Full name of contributor Kevin Lang	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 179 Winchester St Brookline, MA 02446			
Principal occupation / Job title (See instructions) Professor of Economics		Employer (See instructions) Boston University	
Date 1/31/2025	Full name of contributor William OBrien	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; City; State; Zip Code 3838 Lockhill Selma Rd Apt 314 San Antonio, TX 78230			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 65 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/31/2025	5 Full name of contributor Maria Marily Mondejar	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; PO Box 190007 San Francisco, CA 94119			
8 Principal occupation / Job title (See instructions) CEO		9 Employer (See instructions) Filipina Womens Network	
Date 1/31/2025	Full name of contributor Maria Marily Mondejar	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 490.00
Contributor address; PO Box 190007 San Francisco, CA 94119			
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) Filipina Womens Network	
Date 1/31/2025	Full name of contributor Cynthia Payne	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 69 Wisteria Dr Oakwood, OH 45419			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/31/2025	Full name of contributor Carol Pines	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 9538 Millers Rdg San Antonio, TX 78239			
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 66 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/31/2025	5 Full name of contributor Jeremy Platt	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 2265 Bowdoin St Palo Alto, CA 94306			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/31/2025	Full name of contributor Destinee Serdinia	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 9116 Salfish Dr Boerne, TX 78006			City; State; Zip Code
Principal occupation / Job title (See instructions) not employed		Employer (See instructions) none	
Date 1/31/2025	Full name of contributor Liz Sibley	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 1 Las Auras Alpine, TX 79830			City; State; Zip Code
Principal occupation / Job title (See instructions) Artist		Employer (See instructions) Self	
Date 1/31/2025	Full name of contributor Lesley Rubin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 21102 Sonoma San Antonio, TX 78259			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 67 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/31/2025	5 Full name of contributor Tracy Rothstein	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 174 Watercolor Way Ste Pm 103 Santa Rosa Beach, FL 32459			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/31/2025	Full name of contributor Rebecca Rauhala	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; PO Box 881 Salinas, CA 93902			
Principal occupation / Job title (See instructions) Accountant		Employer (See instructions) Self	
Date 1/31/2025	Full name of contributor Frances Ravicz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 51 Bristol Grn San Antonio, TX 78209			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/31/2025	Full name of contributor James Stuart	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 170 Westview Rd Winnetka, IL 60093			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 68 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/31/2025	5 Full name of contributor Ronald Smith	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 5.00
6 Contributor address; 13510 Charter Bend Dr San Antonio, TX 78231			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/31/2025	Full name of contributor Victor Weir	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 4324 Peggy Ln Plano, TX 75074			
Principal occupation / Job title (See instructions) physcist/teacher		Employer (See instructions) dcccd/ BSWH	
Date 1/31/2025	Full name of contributor Bob Wheeler	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 4946 Tinderbox Cir Manlius, NY 13104			
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 1/31/2025	Full name of contributor Matthew Corridoni	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 565 Pennsylvania Ave NW Apt 407 Washington, DC 20001			
Principal occupation / Job title (See instructions) DNC		Employer (See instructions) Spokesperson	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 69 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/31/2025	5 Full name of contributor Gem Daus	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 4600 S Four Mile Run Dr Apt 1234 Arlington, VA 22204			
8 Principal occupation / Job title (See instructions) Public Health Analyst		9 Employer (See instructions) US	
Date 1/31/2025	Full name of contributor Robin Crawley	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 1661 N Belfast Ave Vassalboro, ME 04989			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/31/2025	Full name of contributor Kathryn Burkhardt	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 416 Jared Way New Holland, PA 17557			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/31/2025	Full name of contributor Valerie Booze	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 5133 Long Pointe Rd Wilmington, NC 28409			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 70 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/31/2025	5 Full name of contributor Violette Blumenthal	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 5.00
6 Contributor address; 4125 Settlement Dr Durham, NC 27713			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/31/2025	Full name of contributor Lucille Barish	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 200 Riverside Dr Apt 6A New York, NY 10025			City; State; Zip Code
Principal occupation / Job title (See instructions) Psychotherapist		Employer (See instructions) Self	
Date 1/31/2025	Full name of contributor Janet P Bartos	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 75 Chevaux Cir Little Rock, AR 72223			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/31/2025	Full name of contributor Faye Baylan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 144 Stone Hill Dr San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) RN		Employer (See instructions) Baylan MDPA	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 71 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/31/2025	5 Full name of contributor Mary Green	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 116 Bryn Mawr Dr San Antonio, TX 78209			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/31/2025	Full name of contributor Katharine Gross	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 8.00
Contributor address; 2120 Contreras Rd NE Rio Rancho, NM 87144			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/31/2025	Full name of contributor Donald Goff	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 7213 Boniface Ln Austin, TX 78729			City; State; Zip Code
Principal occupation / Job title (See instructions) Software developer		Employer (See instructions) FieldComm Group Inc.	
Date 1/31/2025	Full name of contributor Mark Freeland	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 12.25
Contributor address; 6737 NW Northridge Ln Bremerton, WA 98312			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 72 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/31/2025	5 Full name of contributor Scott Heinze	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 1.57
6 Contributor address; 630 Gramatan Ave Apt 4E Mount Vernon, NY 10552			
8 Principal occupation / Job title (See instructions) Surgical Assistant		9 Employer (See instructions) Amenedo Oral Surgery LLC	
Date 1/31/2025	Full name of contributor Karen Grimaldi	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 132 Jacksonville Rd Pompton Plains, NJ 07444			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/31/2025	Full name of contributor Sheila Keith	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 3532 Oliver Rd Carmel, CA 93923			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/31/2025	Full name of contributor Thomas Koontz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 4604 47th Ave S Seattle, WA 98118			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 73 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 1/31/2025	5 Full name of contributor Daniel Jones	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 361 Lake Leamon Rd # 35 Wallace, NC 28466			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 1/31/2025	Full name of contributor Pamela Wright-Haynes	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; PO Box 421075 Del Rio, TX 78842			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 1/31/2025	Full name of contributor Steven C Wiggins	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 4016 3rd St S # 1131 Jacksonville Beach, FL 32250			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/1/2025	Full name of contributor Gregory Hahn	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 1625 Northwood Dr Indianapolis, IN 46240			
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Bose Public Affairs Group	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 74 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/1/2025	5 Full name of contributor Davida Dwyer	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 1804 Kingwood Cv Austin, TX 78757			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Lawyer		9 Employer (See instructions) State	
Date 2/1/2025	Full name of contributor Kimberly Hughes	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 300 Summit Ave Mill Valley, CA 94941			City; State; Zip Code
Principal occupation / Job title (See instructions) real estate		Employer (See instructions) self	
Date 2/1/2025	Full name of contributor Carol Axelrod	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 7 Grey Stone Path Dedham, MA 02026			City; State; Zip Code
Principal occupation / Job title (See instructions) social worker		Employer (See instructions) Rasi Associates	
Date 2/1/2025	Full name of contributor Melvin Cohen	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 13722 Cape Blf San Antonio, TX 78216			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 75 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/1/2025	5 Full name of contributor Carol Warkoczewski	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 19603 Encino Way San Antonio, TX 78259			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Consultant		9 Employer (See instructions) Self	
Date 2/1/2025	Full name of contributor Lee Warren	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 53 Newtonville Ave Newton, MA 02458			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/1/2025	Full name of contributor Deet Turnage	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 7641 E Camino Montaraz Tucson, AZ 85715			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/1/2025	Full name of contributor Lynda Marin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 2830 Smith Grade Santa Cruz, CA 95060			City; State; Zip Code
Principal occupation / Job title (See instructions) climate justice philanthropy		Employer (See instructions) Citizens Climate Lobby	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 76 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/1/2025	5 Full name of contributor Julane Martin	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 1475 Falabella Dr Jacksonville, FL 32218			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/2/2025	Full name of contributor Menashe Mizrachi	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 10 Willowdale Dr Cherry Hill, NJ 08003			
Principal occupation / Job title (See instructions) Painter		Employer (See instructions) Self Employed	
Date 2/2/2025	Full name of contributor Maryann Rainey	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Contributor address; 1318 4th Ave San Francisco, CA 94122			
Principal occupation / Job title (See instructions) nursing		Employer (See instructions) SFUSD	
Date 2/2/2025	Full name of contributor Charla Gabert	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 150 Castle Crest Rd Alamo, CA 94507			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 77 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/3/2025	5 Full name of contributor Eliza Santos	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 1726 Goldgap Fox San Antonio, TX 78245			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Customer care rep		9 Employer (See instructions) Southwest Airlines	
Date 2/4/2025	Full name of contributor Love T Duka	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 7039 San Pedro Ave Apt 508 San Antonio, TX 78216			City; State; Zip Code
Principal occupation / Job title (See instructions) Caregiver		Employer (See instructions) Love Duka	
Date 2/4/2025	Full name of contributor Laurel Mancini	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 3944 Pollypine Dr Virginia Beach, VA 23452			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/4/2025	Full name of contributor Tara Johnson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 1510 Rice Creek Dr NE Minneapolis, MN 55432			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

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2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/4/2025	5 Full name of contributor Sandi Hebley	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 12304 Shiremont Dr Dallas, TX 75230			
8 Principal occupation / Job title (See instructions) RN LMSW		9 Employer (See instructions) Faith Presbyterian Hospice	
Date 2/4/2025	Full name of contributor Robert Curtis	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 4109 Edgevale Ct Chevy Chase, MD 20815			
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 2/4/2025	Full name of contributor Kim Cauthorn	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 314 W Elsmere Pl San Antonio, TX 78212			
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Willis Towers Watson	
Date 2/4/2025	Full name of contributor Michael Crow	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 444 Shadwell Dr San Antonio, TX 78228			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 79 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/5/2025	5 Full name of contributor Cristina Ayala	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 750.00
	6 Contributor address; PO Box 300146 Austin, TX 78703	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Consultant		9 Employer (See instructions) Self	
Date 2/5/2025	Full name of contributor Michael Anderson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
	Contributor address; 310 W 52nd St Apt 16A New York, NY 10019	City; State; Zip Code	
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) Mount Sinai	
Date 2/5/2025	Full name of contributor John Blendell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
	Contributor address; 3335 Military Rd NW Washington, DC 20015	City; State; Zip Code	
Principal occupation / Job title (See instructions) professor		Employer (See instructions) Purdue University	
Date 2/5/2025	Full name of contributor Gary Fernandes	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
	Contributor address; 3625 N Hall St Ste 750 Dallas, TX 75219	City; State; Zip Code	
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 80 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/5/2025	5 Full name of contributor Jerry Duterroil	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
	6 Contributor address; 702 Lost Cyn San Antonio, TX 78258	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Not employed		9 Employer (See instructions) Not employed	
Date 2/5/2025	Full name of contributor Luisa Park	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
	Contributor address; 5075 Sienna Ln Sacramento, CA 95835	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/5/2025	Full name of contributor Sarah Natkins	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
	Contributor address; 201 Greene Ave Apt 1 Brooklyn, NY 11238	City; State; Zip Code	
Principal occupation / Job title (See instructions) Public Relations		Employer (See instructions) Self	
Date 2/5/2025	Full name of contributor Kathryn Smith-Connell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 3.00
	Contributor address; 7067 N Ashland Blvd Chicago, IL 60626	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 81 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/5/2025	5 Full name of contributor Tim Snider	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 5.00
6 Contributor address; PO Box 3341 Branford, CT 06405			
8 Principal occupation / Job title (See instructions) Self		9 Employer (See instructions) Self	
Date 2/5/2025	Full name of contributor Cynthia Silbert	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 106 Spooner Rd Chestnut Hill, MA 02467			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/6/2025	Full name of contributor Dorothea Leicher	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 411 Walnut St # 11100 Green Cove Springs, FL 32043			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/6/2025	Full name of contributor Betsy Berman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 1084 Saint Louis PI NE Atlanta, GA 30306			
Principal occupation / Job title (See instructions) General Contractor		Employer (See instructions) Self	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 82 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/6/2025	5 Full name of contributor Jessica Weldon	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 15.00
6 Contributor address; 3525 Galena Hills Loop Round Rock, TX 78681			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Training Director		9 Employer (See instructions) Arena	
Date 2/6/2025	Full name of contributor Stephen Adams	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 2324 N 55th St Seattle, WA 98103			City; State; Zip Code
Principal occupation / Job title (See instructions) Software Engineer		Employer (See instructions) Google	
Date 2/6/2025	Full name of contributor Sheila Colombana	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; PO Box 191 Philo, CA 95466			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/6/2025	Full name of contributor LGBTQ+ Victory Fund	<input checked="" type="checkbox"/> out-of-state PAC (ID# C00476978)	Amount of contribution (\$) 902.50
Contributor address; 1225 I St NW Ste 525 Washington, DC 20005			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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 83 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/7/2025	5 Full name of contributor Barry Fass-Holmes	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 10250 Caminito Cuervo Unit 28 San Diego, CA 92108			
8 Principal occupation / Job title (See instructions) Student Services Professional		9 Employer (See instructions) San Diego State University	
Date 2/7/2025	Full name of contributor Shawn Gaylord	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 1620 Fuller St NW Apt 309 Washington, DC 20009			
Principal occupation / Job title (See instructions) Principal		Employer (See instructions) Raben	
Date 2/7/2025	Full name of contributor Kenny Goss	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 7510 Turtle Creek Blvd # 18A Dallas, TX 75225			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/7/2025	Full name of contributor Susan Weir	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 2 Larchwood Dr Cambridge, MA 02138			
Principal occupation / Job title (See instructions) Scientist		Employer (See instructions) Joslin Diabetes Center	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 84 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/8/2025	5 Full name of contributor Mary Palmer	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 407 Castenada Ave San Francisco, CA 94116			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/8/2025	Full name of contributor Thomas Koontz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 4604 47th Ave S Seattle, WA 98118			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/8/2025	Full name of contributor Regina Brayer	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 20154 S Shore Dr Montgomery, TX 77356			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/9/2025	Full name of contributor Barbara Bornstein	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 63 Havencrest Ave Ponte Vedra, FL 32081			
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 85 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/9/2025	5 Full name of contributor Carol Kner	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 251 E 32nd St New York, NY 10016			City; State; Zip Code
8 Principal occupation / Job title (See instructions) not employed		9 Employer (See instructions) Not Employed	
Date 2/9/2025	Full name of contributor Julia Huff-Jerome	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 138 Bent Tree Pittsboro, NC 27312			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) State of NC (retired)	
Date 2/9/2025	Full name of contributor Donna Heien	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 110 E Lobelia Dr Sequim, WA 98382			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/9/2025	Full name of contributor Stacie Hare	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 18713 Brookwood Frst San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) Managing Director of Impact		Employer (See instructions) City Year	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 86 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/9/2025	5 Full name of contributor Richard Gray	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 5409 Summer Cir Austin, TX 78741			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not employed		9 Employer (See instructions) Not employed	
Date 2/9/2025	Full name of contributor Malcolm Getz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 6542 Cornwall Dr Nashville, TN 37205			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/9/2025	Full name of contributor Colin Osborne	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 286 Hawk Pine Rd Norwich, VT 05055			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/9/2025	Full name of contributor John Overbeck	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 819 E Dorset St Philadelphia, PA 19119			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 87 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/9/2025	5 Full name of contributor Barry Nall	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
	6 Contributor address; PO Box 205 Comfort, TX 78013	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) not employed		9 Employer (See instructions) none	
Date 2/9/2025	Full name of contributor Kristen Laine	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
	Contributor address; 3102 33rd Ave S Seattle, WA 98144	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/9/2025	Full name of contributor Pamela Wheelock	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
	Contributor address; 790 Graham Dr Chesterton, IN 46304	City; State; Zip Code	
Principal occupation / Job title (See instructions) Self employed		Employer (See instructions) Purrfectplay	
Date 2/9/2025	Full name of contributor Frank Rowsome	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
	Contributor address; 45 Jones Station Rd W Severna Park, MD 21146	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 88 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/9/2025	5 Full name of contributor Kathleen A Ruby	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 1 Albany Ave Apt B101 Kingston, NY 12401			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/9/2025	Full name of contributor Louis A Rishkofski	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 21000 Martin Ln Pflugerville, TX 78660			City; State; Zip Code
Principal occupation / Job title (See instructions) therapist		Employer (See instructions) self employed	
Date 2/9/2025	Full name of contributor Jan Reed	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 2268 E Walnut St Evansville, IN 47714			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/10/2025	Full name of contributor Robin Prescott	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 107 Roadrunner Trl Boerne, TX 78006			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 89 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/10/2025	5 Full name of contributor Sharon Stokes	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 2499 Dorsey Dr Hubbard, OR 97032			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/10/2025	Full name of contributor Gary Tackes	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 537 N Montgomery St Port Washington, WI 53074			City; State; Zip Code
Principal occupation / Job title (See instructions) Engineer		Employer (See instructions) Hooper Corporation	
Date 2/10/2025	Full name of contributor Wendy Olmsted	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 1345 E Madison Park Chicago, IL 60615			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 2/10/2025	Full name of contributor Lisa Polbsy	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 850 Balton Ct Naperville, IL 60563			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 90 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/10/2025	5 Full name of contributor Lucy Petrow	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 1236 E Chandler Dr Salt Lake City, UT 84103			
8 Principal occupation / Job title (See instructions) Lawyer		9 Employer (See instructions) Public Counsel Law Center	
Date 2/10/2025	Full name of contributor Sharon Gless	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 5900 Wilshire Blvd Ste 2300 Los Angeles, CA 90036			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/10/2025	Full name of contributor Frankie Harris	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 901 Williams Ditch Rd Cantonment, FL 32533			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/10/2025	Full name of contributor Mary Kite	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 2532 31st Ave S Seattle, WA 98144			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 91 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/10/2025	5 Full name of contributor Stephanie Childs	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 200.00
6 Contributor address; 3501 Ranch Road 620 S Austin, TX 78738			City; State; Zip Code
8 Principal occupation / Job title (See instructions) PR		9 Employer (See instructions) FleishmanHillard	
Date 2/10/2025	Full name of contributor Norma Ayee	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 703 N Lakeside Dr Lake Worth, FL 33460			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/11/2025	Full name of contributor Vanessa Perez-King	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 11310 Fair Hollow Dr San Antonio, TX 78249			City; State; Zip Code
Principal occupation / Job title (See instructions) Senior Product Owner		Employer (See instructions) USAA	
Date 2/11/2025	Full name of contributor Dinah Chenven	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 3403 Spanish Oak Dr Austin, TX 78731			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 92 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/11/2025	5 Full name of contributor Suzanne Bartolucci	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 200.00
6 Contributor address; 3131 Turtle Creek Blvd Ste 208 Dallas, TX 75219			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/11/2025	Full name of contributor John Cawley	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 25 Cedar Ln Ithaca, NY 14850			City; State; Zip Code
Principal occupation / Job title (See instructions) Professor		Employer (See instructions) Cornell University	
Date 2/11/2025	Full name of contributor Susan Damplo	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 110 W 3rd St Apt 1401 New York, NY 10012			City; State; Zip Code
Principal occupation / Job title (See instructions) attorney		Employer (See instructions) self	
Date 2/11/2025	Full name of contributor Simone Coxe	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 1515 Harbor View Rd West Lake Hills, TX 78746			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 93 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/11/2025	5 Full name of contributor Ann Horak	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 617 Cincinnati Ave El Paso, TX 79902			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/11/2025	Full name of contributor Christi Jones	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 1103 Coe Dr San Antonio, TX 78251			City; State; Zip Code
Principal occupation / Job title (See instructions) Instructor		Employer (See instructions) Navy	
Date 2/11/2025	Full name of contributor Adolfo Garnica	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 22 Ouachita Dr Maumelle, AR 72113			City; State; Zip Code
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) UAMS	
Date 2/11/2025	Full name of contributor Lourdes D Stevens	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 903 Olivia Vw San Antonio, TX 78260			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 94 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/11/2025	5 Full name of contributor Armando J Valdez	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 1426 W Elsmere PI San Antonio, TX 78201			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/11/2025	Full name of contributor Sarah Woodin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 4645 Datura Rd Columbia, SC 29205			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 2/12/2025	Full name of contributor Willard Tom	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 5610 Wisconsin Ave Apt 1403 Chevy Chase, MD 20815			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/12/2025	Full name of contributor Tim Snider	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; PO Box 3341 Branford, CT 06405			City; State; Zip Code
Principal occupation / Job title (See instructions) Self		Employer (See instructions) Self	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 95 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/12/2025	5 Full name of contributor Araceli Rodriguez	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 20.00
6 Contributor address; 10418 Star Mica Boerne, TX 78006			City; State; Zip Code
8 Principal occupation / Job title (See instructions) DOD		9 Employer (See instructions) DOD	
Date 2/12/2025	Full name of contributor Ffac Pac	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 400.00
Contributor address; PO Box 8095 Pittsburg, CA 94565			City; State; Zip Code
Principal occupation / Job title (See instructions) self employed		Employer (See instructions) self employed	
Date 2/12/2025	Full name of contributor Tammy Merritt	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 1310 Q St NW Washington, DC 20009			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/12/2025	Full name of contributor Sahiti Karempudi	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 1409 Holly St Austin, TX 78702			City; State; Zip Code
Principal occupation / Job title (See instructions) program coordinator		Employer (See instructions) City of Austin	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 96 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/12/2025	5 Full name of contributor Irene Bueno	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 3108 33rd PI NW Washington, DC 20008			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Partner		9 Employer (See instructions) NVG LLC	
Date 2/13/2025	Full name of contributor Claire Barnett	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Contributor address; 2922 Meadow Thrush St San Antonio, TX 78231			City; State; Zip Code
Principal occupation / Job title (See instructions) Executive Director		Employer (See instructions) Blue Horizon Texas	
Date 2/13/2025	Full name of contributor Stephen Horn	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 3333 Allen Pkwy Unit 2501 Houston, TX 77019			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/13/2025	Full name of contributor Kerry Francis	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 59.92
Contributor address; 90 W Grant St Healdsburg, CA 95448			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 97 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/13/2025	5 Full name of contributor John Mitchell	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 5405 Aurora Dr Austin, TX 78756			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/13/2025	Full name of contributor Jun Makihara	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 259 E 7th St Ph 1 New York, NY 10009			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/13/2025	Full name of contributor Thomas Webber	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 141 Beaconsfield Rd Apt 6 Brookline, MA 02445			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/13/2025	Full name of contributor Stephen Warnke	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 186 8th Ave Brooklyn, NY 11215			City; State; Zip Code
Principal occupation / Job title (See instructions) Lawyer		Employer (See instructions) Ropes & Gray LLP	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 98 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/14/2025	5 Full name of contributor Love T Duka	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 7039 San Pedro Ave Apt 508 San Antonio, TX 78216			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Caregiver		9 Employer (See instructions) Love Duka	
Date 2/14/2025	Full name of contributor Robin Prescott	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 107 Roadrunner Trl Boerne, TX 78006			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/14/2025	Full name of contributor Tracy Rothstein	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 174 Watercolor Way Ste Pm 103 Santa Rosa Beach, FL 32459			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/14/2025	Full name of contributor Arthur Silbergeld	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 735 Kingman Ave Santa Monica, CA 90402			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Thompsoncoburn	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 99 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/14/2025	5 Full name of contributor Nathan Shapiro	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 15.00
6 Contributor address; 242 Impala Trce San Antonio, TX 78258			
8 Principal occupation / Job title (See instructions) Manager		9 Employer (See instructions) Jmp	
Date 2/14/2025	Full name of contributor Floris M I Kkelsen	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 5722 Keystone Pl N Seattle, WA 98103			
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A	
Date 2/14/2025	Full name of contributor Kassi Longoria	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 3204 Western Dr Austin, TX 78745			
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) MAYA Consulting	
Date 2/14/2025	Full name of contributor Heidi L. Gerbracht	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 1163 Poquito St Austin, TX 78702			
Principal occupation / Job title (See instructions) non profit professional		Employer (See instructions) re:power	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 100 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/14/2025	5 Full name of contributor Beverly Kubon	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 15.00
6 Contributor address; 1117 Canfield Cir SE Palm Bay, FL 32909			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/14/2025	Full name of contributor Raymond Miller	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 9.00
Contributor address; 218 Peppertree Crossing Ave Brunswick, GA 31525			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/14/2025	Full name of contributor Scott Mendeloff	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 2743 N Dayton St Chicago, IL 60614			City; State; Zip Code
Principal occupation / Job title (See instructions) Lawyer		Employer (See instructions) Greenberg Traurig	
Date 2/14/2025	Full name of contributor Lynda Marin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 2830 Smith Grade Santa Cruz, CA 95060			City; State; Zip Code
Principal occupation / Job title (See instructions) climate justice philanthropy		Employer (See instructions) Citizens Climate Lobby	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 101 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/14/2025	5 Full name of contributor Paula Oneal	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 102 La Paloma Dr Del Rio, TX 78840			City; State; Zip Code
8 Principal occupation / Job title (See instructions) RETIRED		9 Employer (See instructions) N/A	
Date 2/14/2025	Full name of contributor Donna Pereira	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 210 Lovera Blvd San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/14/2025	Full name of contributor Susan Peet	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 4 Stones Throw Rd Wilmington, DE 19803			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A	
Date 2/14/2025	Full name of contributor Robin Prescott	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 107 Roadrunner Trl Boerne, TX 78006			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 102 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/14/2025	5 Full name of contributor Sharon Mize	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 1302 Vista Del Rio San Antonio, TX 78216			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/14/2025	Full name of contributor Richard Murphy	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 1342 Oak Path San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) network designer		Employer (See instructions) Southwest Research Institute	
Date 2/14/2025	Full name of contributor Mary Lu Murphy	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 244 Avalon Dr Pacific, CA 94044			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/14/2025	Full name of contributor Cassandra Dickson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 638 NW Skyline Crest Rd Portland, OR 97229			City; State; Zip Code
Principal occupation / Job title (See instructions) Writer		Employer (See instructions) Self	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 103 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/14/2025	5 Full name of contributor Catherine Dennerlein	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 1037 NW Lawnridge Ave Grants Pass, OR 97526			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Environmental Educator		9 Employer (See instructions) Bureau of Land Management	
Date 2/14/2025	Full name of contributor Kristen Kavanaugh	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 2800 Del Curto Rd Apt 5 Austin, TX 78704			City; State; Zip Code
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) The Agency Initiative	
Date 2/14/2025	Full name of contributor Sharon Herb	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 2416 Houcks Mill Rd Monkton, MD 21111			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/14/2025	Full name of contributor Lucille Barish	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 200 Riverside Dr Apt 6A New York, NY 10025			City; State; Zip Code
Principal occupation / Job title (See instructions) Psychotherapist		Employer (See instructions) Self	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 104 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/14/2025	5 Full name of contributor Betsy Berman	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 5.00
6 Contributor address; 1084 Saint Louis PI NE Atlanta, GA 30306			City; State; Zip Code
8 Principal occupation / Job title (See instructions) General Contractor		9 Employer (See instructions) Self	
Date 2/14/2025	Full name of contributor Bonnie Bragg	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 232 Congress Ave Pacific Grove, CA 93950			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/14/2025	Full name of contributor Esther Caldwell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 568 Beach 131St St Belle Harbor, NY 11694			City; State; Zip Code
Principal occupation / Job title (See instructions) teacher		Employer (See instructions) West End Temple Nursery School	
Date 2/14/2025	Full name of contributor Bill Carr	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1.00
Contributor address; 8608 La Quinta Ln Mckinney, TX 75070			City; State; Zip Code
Principal occupation / Job title (See instructions) Realtor		Employer (See instructions) Keller Williams	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 105 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/14/2025	5 Full name of contributor Barbara Winston	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 3118 Ferndale St Houston, TX 77098			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/14/2025	Full name of contributor Steven C Wiggins	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 4016 3rd St S # 1131 Jacksonville Beach, FL 32250			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/14/2025	Full name of contributor Vote Vets	<input checked="" type="checkbox"/> out-of-state PAC (ID# C00418897)	Amount of contribution (\$) 1000.00
Contributor address; PO Box 11293 Portland, OR 97211			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/15/2025	Full name of contributor Kathleen Burke	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 320 Blackfield Dr Tiburon, CA 94920			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 106 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/15/2025	5 Full name of contributor Kim Cauthorn	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 314 W Elsmere PI San Antonio, TX 78212			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Willis Towers Watson	
Date 2/15/2025	Full name of contributor Betsy Berman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 1084 Saint Louis PI NE Atlanta, GA 30306			City; State; Zip Code
Principal occupation / Job title (See instructions) General Contractor		Employer (See instructions) Self	
Date 2/15/2025	Full name of contributor Bernadette Lewis	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 4827 El Gusto St San Antonio, TX 78233			City; State; Zip Code
Principal occupation / Job title (See instructions) Marketing manager		Employer (See instructions) Strategic Education Inc	
Date 2/15/2025	Full name of contributor Mallory Hart	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 6706 Tulane Dr Austin, TX 78723			City; State; Zip Code
Principal occupation / Job title (See instructions) Project Manager		Employer (See instructions) Travis County	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 107 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/15/2025	5 Full name of contributor Sharon Guild-Stitt	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
	6 Contributor address; 9510 Jason Bnd Helotes, TX 78023	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) part-time self employed		9 Employer (See instructions) none	
Date 2/15/2025	Full name of contributor Robert Dizinno	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
	Contributor address; 8530 Blackcastle Dr San Antonio, TX 78254	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/15/2025	Full name of contributor Piper Nelson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
	Contributor address; 3206 Harris Park Ave Austin, TX 78705	City; State; Zip Code	
Principal occupation / Job title (See instructions) Executive Director		Employer (See instructions) I Live Here I Give Here	
Date 2/15/2025	Full name of contributor Raquel Matas	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
	Contributor address; 820 Valencia Ave Coral Gables, FL 33134	City; State; Zip Code	
Principal occupation / Job title (See instructions) special advisor		Employer (See instructions) miami dade county	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 108 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/15/2025	5 Full name of contributor Mary B Lockhart	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 107 E Lockhart Ave Alpine, TX 79830			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/15/2025	Full name of contributor William Sibley	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 535 E Craig PI San Antonio, TX 78212			
Principal occupation / Job title (See instructions) author		Employer (See instructions) self	
Date 2/15/2025	Full name of contributor Timothy Rabroker	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 893 Shaw Ln Killeen, TX 76542			
Principal occupation / Job title (See instructions) Firefighter		Employer (See instructions) City of Killeen	
Date 2/15/2025	Full name of contributor Gina Vidaurri	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 2602 Marshwood St San Antonio, TX 78228			
Principal occupation / Job title (See instructions) Accounting Manager		Employer (See instructions) Dykema Gossett	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 109 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/16/2025	5 Full name of contributor Regina Todd 6 Contributor address; 18 B Chance St Devens, MA 01434	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 20.00
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/16/2025	Full name of contributor Michael Tapia Contributor address; 5006 Casa Grande St San Antonio, TX 78233	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/16/2025	Full name of contributor Leif Haase Contributor address; 19 Arlington Ct Kensington, CA 94707	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) President		Employer (See instructions) LWH Consulting	
Date 2/16/2025	Full name of contributor Ina Heafitz Contributor address; 1 13th St Charlestown, MA 02129	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) not employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 110 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/16/2025	5 Full name of contributor Barbara Armstrong	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 3055 Trailwood Dr E Burleson, TX 76028			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not employed		9 Employer (See instructions) Not employed	
Date 2/17/2025	Full name of contributor Rosine Hall	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 4509 Mandell St Houston, TX 77006			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/18/2025	Full name of contributor Kimberly Hoover	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 1000 Brickell Plz Unit 2912 Miami, FL 33131			City; State; Zip Code
Principal occupation / Job title (See instructions) Investor		Employer (See instructions) Red Multifamily	
Date 2/18/2025	Full name of contributor David Ingram	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 11903 Budapest San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 111 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/18/2025	5 Full name of contributor Margaret Flinner	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 4537 Grant Rd NW Washington, DC 20016			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/18/2025	Full name of contributor Kaashif Ahmad	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 8310 Hunters Creek Dr Houston, TX 77024			City; State; Zip Code
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) Pediatrics Medical Group	
Date 2/18/2025	Full name of contributor Kathleen Burke	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 320 Blackfield Dr Tiburon, CA 94920			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/18/2025	Full name of contributor Linda Collier	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 942 Passiflora Ave Encinitas, CA 92024			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 112 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/18/2025	5 Full name of contributor Mary Snider	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 1504 13th St NW Washington, DC 20005			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Insurance		9 Employer (See instructions) Self	
Date 2/18/2025	Full name of contributor Fred Smith	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 587 Virginia Ave NE Ph 2 Atlanta, GA 30306			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/18/2025	Full name of contributor Janet Realini	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 24348 Cherry Spg San Antonio, TX 78255			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/18/2025	Full name of contributor Robin Schwartz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 5765 SW 54th Ter Miami, FL 33155			City; State; Zip Code
Principal occupation / Job title (See instructions) Mortgage Broker		Employer (See instructions) Barrett Financial	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 113 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/18/2025	5 Full name of contributor Ann Liston	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 1580 Powers Lake Rd Genoa City, WI 53128			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Partner		9 Employer (See instructions) AL Media	
Date 2/18/2025	Full name of contributor Janice Miller	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 3003 Northridge Dr San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/18/2025	Full name of contributor Robert Michel	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 712 Sparks Ave Austin, TX 78705			City; State; Zip Code
Principal occupation / Job title (See instructions) Film and Music Producer		Employer (See instructions) Loudhouse Productions LLC	
Date 2/19/2025	Full name of contributor Jennifer Mills	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 735 Broad St Ste 218 Chattanooga, TN 37402			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 114 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/19/2025	5 Full name of contributor James Mills	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 1000.00
6 Contributor address; 735 Broad St Chattanooga, TN 37402			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Member Mgr		9 Employer (See instructions) Ajax Mgt.	
Date 2/19/2025	Full name of contributor Andy Mcgarrahan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 4.00
Contributor address; 7110 Canongate Dr Dallas, TX 75248			City; State; Zip Code
Principal occupation / Job title (See instructions) Psychologist		Employer (See instructions) Self	
Date 2/19/2025	Full name of contributor Joyce Nowak	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 7415 Williamsburg Colonial Ln Saint Louis, MO 63119			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/19/2025	Full name of contributor Robert Shirley	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 3408 Pear St SE Tumwater, WA 98501			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 115 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/19/2025	5 Full name of contributor Robert Rothen	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 9926 Cominsky Park San Antonio, TX 78250			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/19/2025	Full name of contributor Ana Luisa Salas-Porras	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 4507 Shoal Creek Blvd Austin, TX 78756			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/19/2025	Full name of contributor Barbara Stowe	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 11507 Woodstock Way Reston, VA 20194			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/19/2025	Full name of contributor Eliot Weinstein	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 5482 S Hyde Park Blvd Chicago, IL 60615			City; State; Zip Code
Principal occupation / Job title (See instructions) Graduate Student		Employer (See instructions) University of Chicago	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 116 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/19/2025	5 Full name of contributor Tina Hester	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 8425 La Plata Loop Austin, TX 78737			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/20/2025	Full name of contributor Nancy Handel	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 26210 Sunny Mdw San Antonio, TX 78260			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/20/2025	Full name of contributor Linda Faulhaber	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 370 Columbus Ave Apt 4H New York, NY 10024			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/20/2025	Full name of contributor Merrilee Caldwell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 160 Brownell Howland Rd Santa Fe, NM 87501			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 117 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/20/2025	5 Full name of contributor Lawrence Aldridge	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 4505 Mountain Path Dr Austin, TX 78759			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/20/2025	Full name of contributor Earl Shimaoka	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 273 Beemer Ave Sunnyvale, CA 94086			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/20/2025	Full name of contributor Dia Morgan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 1050 Huckleberry Ln Glenview, IL 60025			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorneoy		Employer (See instructions) Adapt of America Inc.	
Date 2/20/2025	Full name of contributor Denise Pierce	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 2117 Cervin Blvd Austin, TX 78728			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 118 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/20/2025	5 Full name of contributor Pamela Pearson	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 1000.00
6 Contributor address; 2301 E 13th St Austin, TX 78702			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/20/2025	Full name of contributor Michal Elaine Peckham	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 5310 W Lone Cactus Dr Glendale, AZ 85308			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/20/2025	Full name of contributor Thomas Marlowe	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 777 Jefferson Ave Apt 8 Rahway, NJ 07065			City; State; Zip Code
Principal occupation / Job title (See instructions) Professor Emeritus		Employer (See instructions) Seton Hall University	
Date 2/20/2025	Full name of contributor Northside AFT Committee on Political Education	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 6502 Bandera Rd Ste 202 San Antonio, TX 78238			City; State; Zip Code
Principal occupation / Job title (See instructions)		Employer (See instructions)	

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 119 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/21/2025	5 Full name of contributor Roger Lowenstein	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 200.00
6 Contributor address; 4536 Wilshire Blvd Unit 6 Los Angeles, CA 90010			City; State; Zip Code
8 Principal occupation / Job title (See instructions) attorney		9 Employer (See instructions) self	
Date 2/21/2025	Full name of contributor Sylvia Sabel	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 2023 28th Ave San Francisco, CA 94116			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/21/2025	Full name of contributor Joel Rubinstein	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 2023 28th Ave San Francisco, CA 94116			City; State; Zip Code
Principal occupation / Job title (See instructions) consultant		Employer (See instructions) self	
Date 2/22/2025	Full name of contributor Josephine Ryan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 104 Burkett Ln Red Oak, TX 75154			City; State; Zip Code
Principal occupation / Job title (See instructions) professor		Employer (See instructions) SMU	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 120 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/22/2025	5 Full name of contributor M Robbins	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 1.00
6 Contributor address; 2600 La Ronde St Austin, TX 78731			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/22/2025	Full name of contributor Ronna Stamm	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 101 Hamilton St Evanston, IL 60202			
Principal occupation / Job title (See instructions) foundation exec		Employer (See instructions) Lehman Stamm Family Fund	
Date 2/22/2025	Full name of contributor Geri Aglipay	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 4345 Main St Skokie, IL 60076			
Principal occupation / Job title (See instructions) Regional Administrator		Employer (See instructions) Small Business Administration	
Date 2/22/2025	Full name of contributor Mary Sherwood Brock	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 2415 Vado Dr Los Angeles, CA 90046			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 121 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/22/2025	5 Full name of contributor Judith Ciani	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 15.00
6 Contributor address; PO Box 960 Inverness, CA 94937			
8 Principal occupation / Job title (See instructions) Not employed		9 Employer (See instructions) Not employed	
Date 2/22/2025	Full name of contributor Kathy Cronkite	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; PO Box 5261 Austin, TX 78763			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/22/2025	Full name of contributor Emma Haft	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 5659 Ocean View Dr Oakland, CA 94618			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/22/2025	Full name of contributor Diane Hart	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 4419 Fulton Ave Apt 26 Sherman Oaks, CA 91423			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 122 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/22/2025	5 Full name of contributor Michael Hawley	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 407 Meyers Dr Greenville, SC 29605			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Business Manager		9 Employer (See instructions) Furman University	
Date 2/22/2025	Full name of contributor Carrie Johnson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 345 E Maine Ave Longwood, FL 32750			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/22/2025	Full name of contributor Rosalyn Zakheim	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 4011 Midway Ave Culver City, CA 90232			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/23/2025	Full name of contributor Gloria Dew	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 47 Ashford Gln San Antonio, TX 78232			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 123 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/23/2025	5 Full name of contributor Cassandra Dickson	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 638 NW Skyline Crest Rd Portland, OR 97229			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Writer		9 Employer (See instructions) Self	
Date 2/23/2025	Full name of contributor Kathy Gonzalez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 4506 Black Oak Woods San Antonio, TX 78249			City; State; Zip Code
Principal occupation / Job title (See instructions) Higher Ed		Employer (See instructions) Risepoint	
Date 2/23/2025	Full name of contributor Samantha Carnahan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 247 Basswood Dr San Antonio, TX 78213			City; State; Zip Code
Principal occupation / Job title (See instructions) Federal Sales Support Specialist		Employer (See instructions) Vibrant Works	
Date 2/23/2025	Full name of contributor Donald Cole	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 89 County Road A052 Estancia, NM 87016			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 124 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/23/2025	5 Full name of contributor M Tijerina	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 118 Lone Falls Dr Universal City, TX 78148			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/23/2025	Full name of contributor Connie Luder	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 471 N Canon Ave Sierra Madre, CA 91024			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 2/23/2025	Full name of contributor Laura Mcmorris	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; PO Box 5512 Austin, TX 78763			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/23/2025	Full name of contributor Adcharaporn Poonsap	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 3315 Just Because San Antonio, TX 78245			City; State; Zip Code
Principal occupation / Job title (See instructions) Cybersecurity		Employer (See instructions) DOD	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 125 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/23/2025	5 Full name of contributor Craig O'Brien	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 3.00
6 Contributor address; 3421 W Chester Pike Apt A11 Newtown Square, PA 19073			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/24/2025	Full name of contributor Joe Moreno	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 1027 W Woodlawn Ave San Antonio, TX 78201			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/24/2025	Full name of contributor Kimberly Perry	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 665 S Skinker Blvd Saint Louis, MO 63105			City; State; Zip Code
Principal occupation / Job title (See instructions) retired		Employer (See instructions) n/a	
Date 2/24/2025	Full name of contributor Glen Maxey	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 5200 Guadalupe St Austin, TX 78751			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 126 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/24/2025	5 Full name of contributor Lee Stokes Hilton	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 1200 Barton Creek Blvd Apt 38 Austin, TX 78735			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/24/2025	Full name of contributor Michele Valdez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 30445 Marshall Rdg Steamboat Springs, CO 80487			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/24/2025	Full name of contributor M Robbins	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1.00
Contributor address; 2600 La Ronde St Austin, TX 78731			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/24/2025	Full name of contributor Claudia Ramirez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 875 County Road 6610 Devine, TX 78016			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 127 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/24/2025	5 Full name of contributor Mark Silverman	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 7404 Brookville Rd Chevy Chase, MD 20815			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/24/2025	Full name of contributor Helen Bryan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 2011 Lakeshore Dr Austin, TX 78746			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 2/24/2025	Full name of contributor David Boudreaux	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; PO Box 24820 New Orleans, LA 70184			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/24/2025	Full name of contributor Victor Andonie	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 206 Blackjack Oak Shavano Park, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Real Estate		Employer (See instructions) MSG Management Inc.	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 128 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/24/2025	5 Full name of contributor Calvin Miller 6 Contributor address; 6744 Pennywell Dr Nashville, TN 37205	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/24/2025	Full name of contributor Betsy Berman Contributor address; 1084 Saint Louis PI NE Atlanta, GA 30306	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Principal occupation / Job title (See instructions) General Contractor		Employer (See instructions) Self	
Date 2/24/2025	Full name of contributor Janet P Bartos Contributor address; 75 Chevaux Cir Little Rock, AR 72223	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/24/2025	Full name of contributor Karen Grimaldi Contributor address; 132 Jacksonville Rd Pompton Plains, NJ 07444	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 129 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/24/2025	5 Full name of contributor James I Kaplan	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
	6 Contributor address; 2821 N Pine Grove Ave Chicago, IL 60657	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Lawyer		9 Employer (See instructions) Quarles & Brady LLP	
Date 2/24/2025	Full name of contributor Martha Hixon	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
	Contributor address; 114 Rio Bravo San Antonio, TX 78232	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/25/2025	Full name of contributor Steven Hays	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
	Contributor address; 3314 Falling Brk San Antonio, TX 78258	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/25/2025	Full name of contributor Nasario Jaimes	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
	Contributor address; 10315 E Rutland Vlg Austin, TX 78758	City; State; Zip Code	
Principal occupation / Job title (See instructions) Strategic Partnerships Manager		Employer (See instructions) Down Ballot Climate Partners	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 130 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/25/2025	5 Full name of contributor Jillian Barron	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
	6 Contributor address; 312 Mcgraw St Seattle, WA 98109	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Sebris Busto James	
Date 2/25/2025	Full name of contributor James Bode	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
	Contributor address; 439 S Cole St Lima, OH 45805	City; State; Zip Code	
Principal occupation / Job title (See instructions) none		Employer (See instructions) James Bode	
Date 2/25/2025	Full name of contributor Chris Clark	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
	Contributor address; 2407 S Congress Ave Ste # E Austin, TX 78704	City; State; Zip Code	
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Adelman Matz	
Date 2/25/2025	Full name of contributor Elizabeth Richardson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 95.92
	Contributor address; 55 Mossfield Rd Waban, MA 02468	City; State; Zip Code	
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 131 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/25/2025	5 Full name of contributor Norrie Nakawatase 6 Contributor address; 11124 Cobalt Dr Aubrey, TX 76227	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See instructions) Not employed		9 Employer (See instructions) Not employed	
Date 2/26/2025	Full name of contributor Mary Lu Murphy Contributor address; 244 Avalon Dr Pacific, CA 94044	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/26/2025	Full name of contributor Cara Martinez Contributor address; 8814 Lost Arbor Cir San Antonio, TX 78240	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Principal occupation / Job title (See instructions) Analyst		Employer (See instructions) USAA	
Date 2/26/2025	Full name of contributor Virginia Millhiser Contributor address; 44 W 77th St New York, NY 10024	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 132 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/26/2025	5 Full name of contributor Timothy Rabroker	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 2.00
6 Contributor address; 893 Shaw Ln Killeen, TX 76542			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Firefighter		9 Employer (See instructions) City of Killeen	
Date 2/26/2025	Full name of contributor Loma Griffith	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 1170 N San Marcos Rd Santa Barbara, CA 93111			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/26/2025	Full name of contributor Stephanie Gomez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 2727 W 18th St Apt 204 Houston, TX 77008			City; State; Zip Code
Principal occupation / Job title (See instructions) Student		Employer (See instructions) UofH	
Date 2/27/2025	Full name of contributor Claire Frueauff	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 20.00
Contributor address; 1907 Woodland Ave Apt A Austin, TX 78741			City; State; Zip Code
Principal occupation / Job title (See instructions) COS		Employer (See instructions) TDP	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 133 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/27/2025	5 Full name of contributor Emmanuel Garcia	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 6820 Baythorne Dr Austin, TX 78747			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Co-Founder		9 Employer (See instructions) Seeker Strategies	
Date 2/27/2025	Full name of contributor Jeffrey Drezner	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 10819 Pleasant Hill Dr Potomac, MD 20854			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/27/2025	Full name of contributor Jay Johnson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 290 Beaver Dam Rd Brookhaven, NY 11719			City; State; Zip Code
Principal occupation / Job title (See instructions) Interior Design		Employer (See instructions) Jed Johnson Associates Inc.	
Date 2/27/2025	Full name of contributor Barry Abrams	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 750.00
Contributor address; 703 Glenchester Dr Houston, TX 77079			City; State; Zip Code
Principal occupation / Job title (See instructions) Lawyer		Employer (See instructions) Blank Rome LLP	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 134 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/27/2025	5 Full name of contributor Doe Florsheim	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 1910 Wroxton Rd Houston, TX 77005			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not employed		9 Employer (See instructions) Not employed	
Date 2/27/2025	Full name of contributor Neva Purnell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Contributor address; 3014 Windsor Rd Austin, TX 78703			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/27/2025	Full name of contributor Tariq Thowfeek	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 1600 Barton Springs Rd Unit 4104 Austin, TX 78704			City; State; Zip Code
Principal occupation / Job title (See instructions) Principal		Employer (See instructions) Seeker Strategies	
Date 2/27/2025	Full name of contributor Michael Tapia	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 5006 Casa Grande St San Antonio, TX 78233			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 135 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/27/2025	5 Full name of contributor Steve Masternak	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 245 Asilomar Ave Pacific Grove , CA 93950			
8 Principal occupation / Job title (See instructions) Military Officer		9 Employer (See instructions) USAF	
Date 2/27/2025	Full name of contributor Roger Lau	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 9103 1st Ave Silver Spring, MD 20910			
Principal occupation / Job title (See instructions) Staff		Employer (See instructions) Democratic National Committee	
Date 2/28/2025	Full name of contributor Sallie Morian	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 1810 Bissonnet St Houston, TX 77005			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/28/2025	Full name of contributor Marita Navarro	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 4327 Bloomdale San Antonio, TX 78218			
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>		
2 FILER NAME Gina O Jones		1 Total pages Schedule A1: 136 of 298
4 Date 2/28/2025	5 Full name of contributor Love T Duka 6 Contributor address; 7039 San Pedro Ave Apt 508 San Antonio, TX 78216	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) Caregiver		9 Employer (See instructions) Love Duka
Date 2/28/2025	Full name of contributor Stephen Suzman Contributor address; 233 Douglass St San Francisco, CA 94114	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) Landscape Design		Employer (See instructions) Self Stephen Suzman/Zeterre
Date 2/28/2025	Full name of contributor Walter Slocombd Contributor address; 4000 Tunlaw Rd NW Apt 816 Washington, DC 20007	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed
Date 2/28/2025	Full name of contributor Ronald Smith Contributor address; 13510 Charter Bend Dr San Antonio, TX 78231	Amount of contribution (\$) 5.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 137 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/28/2025	5 Full name of contributor Thomas C Vinson	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 5.00
6 Contributor address; 1806 N Husband St Stillwater, OK 74075			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/28/2025	Full name of contributor Pamela Quentin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 2.00
Contributor address; 1666 Point Conception Ct Chula Vista, CA 91911			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/28/2025	Full name of contributor Rebel Romero	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; PO Box 14355 Tumwater, WA 98511			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/28/2025	Full name of contributor Liz Sibley	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 6.00
Contributor address; 1 Las Auras Alpine, TX 79830			City; State; Zip Code
Principal occupation / Job title (See instructions) Artist		Employer (See instructions) Self	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 138 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/28/2025	5 Full name of contributor Tracy Rothstein	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 174 Watercolor Way Ste Pm 103 Santa Rosa Beach, FL 32459			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/28/2025	Full name of contributor Elvira Salem	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; PO Box 210455 Royal Palm Beach, FL 33421			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/28/2025	Full name of contributor Ann Leviton	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 701 Snowy Plain Rd Fort Collins, CO 80525			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/28/2025	Full name of contributor Robin Blair	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 16 State St Bloomfield, NY 14469			
Principal occupation / Job title (See instructions) Clergy		Employer (See instructions) UMC	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 139 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/28/2025	5 Full name of contributor Edith Bartley	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 1000.00
6 Contributor address; 14305 Delcastle Dr Bowie, MD 20721			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Advocate		9 Employer (See instructions) TMCF	
Date 2/28/2025	Full name of contributor Walker Colston	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 7309 Davenport Rd Goleta, CA 93117			City; State; Zip Code
Principal occupation / Job title (See instructions) Executive		Employer (See instructions) Keysight	
Date 2/28/2025	Full name of contributor Sarah Cowen	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 801 W Jonquil Ave Mcallen, TX 78501			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Cowen	
Date 2/28/2025	Full name of contributor Gem Daus	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 4600 S Four Mile Run Dr Apt 1234 Arlington, VA 22204			City; State; Zip Code
Principal occupation / Job title (See instructions) Public Health Analyst		Employer (See instructions) US	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 140 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/28/2025	5 Full name of contributor David Brogan	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 126 Magnolia Dr San Antonio, TX 78212			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/28/2025	Full name of contributor Tiffani Chambers	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 21 W 127th St Apt A New York, NY 10027			City; State; Zip Code
Principal occupation / Job title (See instructions) Finance		Employer (See instructions) Goldman Sachs	
Date 2/28/2025	Full name of contributor Joseph Jolly	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 1161 Boylston St Newton, MA 02464			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney / Administrator		Employer (See instructions) Wellan	
Date 2/28/2025	Full name of contributor Jeffrey Jeske	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 306 E 9th Ave Post Falls, ID 83854			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 141 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/28/2025	5 Full name of contributor Jean King	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 4205 Colgate Way Livermore, CA 94550			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 2/28/2025	Full name of contributor Karen Grimaldi	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 132 Jacksonville Rd Pompton Plains, NJ 07444			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/28/2025	Full name of contributor Nancy Handel	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 26210 Sunny Mdw San Antonio, TX 78260			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/28/2025	Full name of contributor Melissa Fitzgerald	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 1755 P St NW Washington, DC 20036			City; State; Zip Code
Principal occupation / Job title (See instructions) Director non profit division		Employer (See instructions) NADCP	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 142 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 2/28/2025	5 Full name of contributor Karen George	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 2328 Rice Blvd Houston, TX 77005			
8 Principal occupation / Job title (See instructions) Financial consultant		9 Employer (See instructions) Ralph S. OConnor & Associates	
Date 2/28/2025	Full name of contributor Mark Freeland	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 12.25
Contributor address; 6737 NW Northridge Ln Bremerton, WA 98312			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/28/2025	Full name of contributor Pamela Wright-Haynes	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; PO Box 421075 Del Rio, TX 78842			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 2/28/2025	Full name of contributor Steven C Wiggins	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 4016 3rd St S # 1131 Jacksonville Beach, FL 32250			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 143 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/1/2025	5 Full name of contributor Rea Freedom	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 19760 Oakmont Dr Los Gatos, CA 95033			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Teacher		9 Employer (See instructions) Sccoe	
Date 3/1/2025	Full name of contributor Karen Glazier	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 4236 Cactus Flower Ln Santa Fe, NM 87507			City; State; Zip Code
Principal occupation / Job title (See instructions) Registered nurse		Employer (See instructions) self	
Date 3/1/2025	Full name of contributor Roger Dowdeswell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 91 Hudson Ave Brooklyn, NY 11201			City; State; Zip Code
Principal occupation / Job title (See instructions) tennis teacher		Employer (See instructions) self	
Date 3/1/2025	Full name of contributor Joann Doyle	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 20 Straits Rd South Deerfield, MA 01373			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 144 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/1/2025	5 Full name of contributor Loretta Cantu-Rothstein	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; PO Box 40172 Albuquerque, NM 87196			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/1/2025	Full name of contributor Allen Bohnert	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 1854 Renoir Ave Davis, CA 95618			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/1/2025	Full name of contributor C De Ben	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 240 E 4th St New York, NY 10009			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 3/1/2025	Full name of contributor Teresa Barnes	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 17681 Sunset Way Sonoma, CA 95476			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>		
2 FILER NAME Gina O Jones		1 Total pages Schedule A1: 145 of 298
4 Date 3/1/2025	5 Full name of contributor Bowen Billups 6 Contributor address; 1924 15th St NW Washington, DC 20009	3 Filer ID (Ethics Commission Filers) 7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) realtor		9 Employer (See instructions) self
Date 3/1/2025	Full name of contributor Mary Beyda Contributor address; 2555 Pennsylvania Ave NW Apt 306 Washington, DC 20037	Amount of contribution (\$) 7.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed
Date 3/1/2025	Full name of contributor Virginia Astilla Contributor address; 126 E Brandon San Antonio, TX 78209	Amount of contribution (\$) 7.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed
Date 3/1/2025	Full name of contributor Barry Rugg Contributor address; 380 Riverside Dr Apt 2D New York, NY 10025	Amount of contribution (\$) 7.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 146 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/1/2025	5 Full name of contributor Michael Shiffman	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 100 Sarah Dr Mill Valley, CA 94941			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Atty		9 Employer (See instructions) Self	
Date 3/1/2025	Full name of contributor Roger Rossen	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 3 Hickory Ln Cumberland, ME 04021			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/1/2025	Full name of contributor M Robbins	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1.00
Contributor address; 2600 La Ronde St Austin, TX 78731			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/1/2025	Full name of contributor Becky Walch	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 775 Ranch Road 1 Stonewall, TX 78671			City; State; Zip Code
Principal occupation / Job title (See instructions) Nurse		Employer (See instructions) SAISD	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 147 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/1/2025	5 Full name of contributor Elizabeth Walch	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 402 Thorain Blvd San Antonio, TX 78212			
8 Principal occupation / Job title (See instructions) Nurse		9 Employer (See instructions) SAISD	
Date 3/1/2025	Full name of contributor Brandon Smith	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 907 E Sayles Dr Palatine, IL 60074			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/1/2025	Full name of contributor Rebecca Stone	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 71 Toxteth St Brookline, MA 02446			
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) Self	
Date 3/1/2025	Full name of contributor Nancy Needham	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 141 St Moritz Dr Wilmington, DE 19807			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 148 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/1/2025	5 Full name of contributor William OBrien	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 3838 Lockhill Selma Rd Apt 314 San Antonio, TX 78230			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/1/2025	Full name of contributor Luisa Park	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 5075 Sienna Ln Sacramento, CA 95835			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/1/2025	Full name of contributor Colin Osborne	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 286 Hawk Pine Rd Norwich, VT 05055			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/1/2025	Full name of contributor Theresa F Lopez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 407 Ken Dr San Antonio, TX 78258			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 149 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/1/2025	5 Full name of contributor Richard Martin	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 5.00
6 Contributor address; 1409 Big Hollow Rd Starksboro, VT 05487			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor Jimmy Martin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 129 Big Thursday Ct Chapin, SC 29036			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor Thomas Marlowe	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 777 Jefferson Ave Apt 8 Rahway, NJ 07065			City; State; Zip Code
Principal occupation / Job title (See instructions) Professor Emeritus		Employer (See instructions) Seton Hall University	
Date 3/2/2025	Full name of contributor Lynda Marin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 2830 Smith Grade Santa Cruz, CA 95060			City; State; Zip Code
Principal occupation / Job title (See instructions) climate justice philanthropy		Employer (See instructions) Citizens Climate Lobby	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 150 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/2/2025	5 Full name of contributor Gloria G Medrano	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 106 Saddlebrook Dr San Antonio, TX 78245			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor Adam Lutynski	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 10 Longwood Dr Unit 335 Westwood, MA 02090			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor Michael Mahaffey	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 31459 Barben Rd Sedro Woolley, WA 98284			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor David Law	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 3589 Porter Hills Ct SE Grand Rapids, MI 49546			City; State; Zip Code
Principal occupation / Job title (See instructions) Engineer		Employer (See instructions) self	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 151 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/2/2025	5 Full name of contributor Susan Peet	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 15.00
6 Contributor address; 4 Stones Throw Rd Wilmington, DE 19803			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) N/A	
Date 3/2/2025	Full name of contributor Lawrence Murray	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 13 Village Ln Daly City, CA 94015			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) self employed	
Date 3/2/2025	Full name of contributor Rhonda Morton	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 40.00
Contributor address; 9365 Pollock Ln Salinas, CA 93907			City; State; Zip Code
Principal occupation / Job title (See instructions) Insurance		Employer (See instructions) The Alera Group Inc.	
Date 3/2/2025	Full name of contributor Carrie Morales	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 8514 Bargamin Dr Austin, TX 78736			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 152 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/2/2025	5 Full name of contributor Darlene Moyer	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 2118 Coach Rd N Columbus, OH 43220			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor Stephen Suzman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 233 Douglass St San Francisco, CA 94114			City; State; Zip Code
Principal occupation / Job title (See instructions) Landscape Design		Employer (See instructions) Self Stephen Suzman/Zeterre	
Date 3/2/2025	Full name of contributor Cynthia Surratt	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 4606 Belinda Lee St San Antonio, TX 78220			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor Karen Temple	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 3.00
Contributor address; 1515 Roundhill Rd Baltimore, MD 21218			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 153 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/2/2025	5 Full name of contributor Max Thibodeaux	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 13938 Bellows Path San Antonio, TX 78253			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Consultant		9 Employer (See instructions) Self-employed	
Date 3/2/2025	Full name of contributor Velma Villegas	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 9 Orsinger Frg San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 3/2/2025	Full name of contributor Steven Wallace	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 1256 Lovell View Dr Knoxville, TN 37932			City; State; Zip Code
Principal occupation / Job title (See instructions) 1256 Lovell View Drive		Employer (See instructions) not employed	
Date 3/2/2025	Full name of contributor Rant Rockel	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 30.00
Contributor address; 1601 Burgos Dr Sarasota, FL 34238			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 154 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/2/2025	5 Full name of contributor Araceli Rodriguez	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 10418 Star Mica Boerne, TX 78006			City; State; Zip Code
8 Principal occupation / Job title (See instructions) DOD		9 Employer (See instructions) DOD	
Date 3/2/2025	Full name of contributor Rachel Rodriguez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 6.00
Contributor address; 170 N Holliston Ave Apt 1 Pasadena, CA 91106			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 3/2/2025	Full name of contributor James Apone	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; PO Box 242213 Anchorage, AK 99524			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor Douglas Creedon	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 14938 Iron Horse Way Helotes, TX 78023			City; State; Zip Code
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) North Memorial Medical Center	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 155 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/2/2025	5 Full name of contributor Michael Berrier	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 202 Lavaca St San Antonio, TX 78210			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Owner		9 Employer (See instructions) La Tuna Icehouse	
Date 3/2/2025	Full name of contributor Uri Barnea	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 9.00
Contributor address; 1104 Poly Dr Billings, MT 59102			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor Lucille Barish	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 200 Riverside Dr Apt 6A New York, NY 10025			City; State; Zip Code
Principal occupation / Job title (See instructions) Psychotherapist		Employer (See instructions) Self	
Date 3/2/2025	Full name of contributor Janet P Bartos	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 75 Chevaux Cir Little Rock, AR 72223			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 156 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/2/2025	5 Full name of contributor Penelope Clute	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 5 Cumberland Ave Plattsburgh, NY 12901			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor Alicia Cardenas	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 9734 Ed Wiseman Trl San Antonio, TX 78251			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor Ernest Bustillos	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 813 Los Olivos Dr San Gabriel, CA 91775			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor Marvin Dejear	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 715 Rio Spgs San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 157 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/2/2025	5 Full name of contributor Conrad Deanda 6 Contributor address; 201 Spruce Ave Dumas, TX 79029	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 5.00
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor Joy Fitzpatrick Contributor address; 5770 Garden Park Dr Garden Valley, CA 95633	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor Angela Gomez Garcia Contributor address; 1919 Clower San Antonio, TX 78201	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Principal occupation / Job title (See instructions) Administrator		Employer (See instructions) Eutopia Hospice	
Date 3/2/2025	Full name of contributor Marc Funderburk Contributor address; 6105 Shorewood Dr Arlington, TX 76016	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) LandPatterns Inc.	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 158 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/2/2025	5 Full name of contributor Herbert Garber	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 834 D Heritage Vlg Southbury, CT 06488			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor Aster Gheresghier	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 1000 S Osage Ave Inglewood, CA 90301			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor Philip Garza	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 701 Kayton Ave San Antonio, TX 78210			City; State; Zip Code
Principal occupation / Job title (See instructions) Police Officer		Employer (See instructions) Department of Veterans Affairs	
Date 3/2/2025	Full name of contributor Gill Gautreau	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 9.00
Contributor address; 605 East Blvd Baton Rouge, LA 70802			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 159 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/2/2025	5 Full name of contributor Edith Hook	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 21.80
6 Contributor address; 9 -3 Countryside Ln Middletown, CT 06457			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor Mary Kraeszig	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 541 Quail Valley Dr Zionsville, IN 46077			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/2/2025	Full name of contributor Robert Howes	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 413 Great Smokey Mountain Dr Mebane, NC 27302			City; State; Zip Code
Principal occupation / Job title (See instructions) teacher		Employer (See instructions) Hawbridge School	
Date 3/2/2025	Full name of contributor Carole Johnson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 2336 London Bridge Rd # 3904 Virginia Beach, VA 23456			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 160 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/2/2025	5 Full name of contributor Cyndi Wimberly	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
	6 Contributor address; 605 S Cactus St Alpine, TX 79830	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Kimberly Jeter	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
	Contributor address; 2336 S Trillium Dr Tucson, AZ 85710	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Karl Jonsson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
	Contributor address; 5514 Grandwood Ln Katy, TX 77450	City; State; Zip Code	
Principal occupation / Job title (See instructions) IT Project Manager		Employer (See instructions) MD Anderson Cancer Center	
Date 3/3/2025	Full name of contributor Kathleen Hudson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
	Contributor address; PO Box 291945 Kerrville, TX 78029	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 161 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2025	5 Full name of contributor Christian Hosford	<input type="checkbox"/> out-of-state PAC (ID# _____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 10 Mill Rd North Hampton, NH 03862			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Consultant		9 Employer (See instructions) CHI Energy Services LLC	
Date 3/3/2025	Full name of contributor Gloria Imagire	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 25.00
Contributor address; 6689 Riptide Way Sacramento, CA 95831			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor John Inciardi	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 25.00
Contributor address; 1623 Hill Rd Novato, CA 94947			City; State; Zip Code
Principal occupation / Job title (See instructions) Proessor		Employer (See instructions) University of California San Francisco	
Date 3/3/2025	Full name of contributor Robert Kreppen	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 10.00
Contributor address; 8315 98H St # 2C New York, NY 11421			City; State; Zip Code
Principal occupation / Job title (See instructions) Stationery Engineer		Employer (See instructions) Rudin Mgmt. Co.	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 162 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2025	5 Full name of contributor Heather Hawkins	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 522 Northern Ave Mill Valley, CA 94941			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Jack Henkin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 1520 Oakwood Ave Highland Park, IL 60035			City; State; Zip Code
Principal occupation / Job title (See instructions) Visiting Scholar		Employer (See instructions) Northwestern University	
Date 3/3/2025	Full name of contributor John Harrison	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 715 Algonquian St Ventura, CA 93001			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Andrew Giannettino	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 1005 SW 16th St Boynton Beach, FL 33426			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 163 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2025	5 Full name of contributor William Gilman	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 1320 E Somerset PI Long Beach, CA 90807			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Visual effects artist		9 Employer (See instructions) Gamblers Ruin	
Date 3/3/2025	Full name of contributor Marilyn Geninatti	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 5502 E Palo Verde Dr Paradise Valley, AZ 85253			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Patricia Geschwent	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 2916 Normandy Dr Philadelphia, PA 19154			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Corliss Fulton	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 4597 Dogwood Ct Oceanside, CA 92056			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 164 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2025	5 Full name of contributor Mark Freeland	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 12.25
6 Contributor address; 6737 NW Northridge Ln Bremerton, WA 98312			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Jennifer Greenhall	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 7574 Plein Aire San Diego, CA 92127			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 3/3/2025	Full name of contributor Stephanie Foizen	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 467 Godshall Rd Souderton, PA 18964			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor David Esterl	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 608 E 6th St Port Angeles, WA 98362			City; State; Zip Code
Principal occupation / Job title (See instructions) CDL Driver Engineer		Employer (See instructions) Rocket Transportation In.	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 165 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2025	5 Full name of contributor Reita Ennis	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 3 Upland Rd Brookline, MA 02445			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Melinda Dearman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 3138 Hidden Haven St San Antonio, TX 78261			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Darryl Deeds	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 4.00
Contributor address; 228 Sandy Rd Rosanky, TX 78953			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Sandra Domingue	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 21267 W Yale St Buckeye, AZ 85396			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>		
2 FILER NAME Gina O Jones		1 Total pages Schedule A1: 166 of 298
4 Date 3/3/2025	5 Full name of contributor Aglaia Cardona 6 Contributor address; 4704 Brandi Way Denair, CA 95316	3 Filer ID (Ethics Commission Filers) 7 Amount of contribution (\$) 10.00
8 Principal occupation / Job title (See instructions) Veterinarian		9 Employer (See instructions) Amerivet
Date 3/3/2025	Full name of contributor Valerie Booze Contributor address; 5133 Long Pointe Rd Wilmington, NC 28409	Amount of contribution (\$) 5.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed
Date 3/3/2025	Full name of contributor Andra Brewer Contributor address; 32 Lovejoy Rd Andover, MA 01810	Amount of contribution (\$) 10.00
Principal occupation / Job title (See instructions) not employed		Employer (See instructions) none
Date 3/3/2025	Full name of contributor Marco Burenko Contributor address; 2713 Newfound Harbor Dr Merritt Island, FL 32952	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) Pathologist		Employer (See instructions) Brevard Pathology P.A.
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 167 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2025	5 Full name of contributor Nancy Burleson	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 1040 Old Mill Rd Anniston, AL 36207			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Al Burlingame	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 26 Alexander Ave Sausalito, CA 94965			
Principal occupation / Job title (See instructions) Prof		Employer (See instructions) Ucsf	
Date 3/3/2025	Full name of contributor Bobbi-Sue Butterfly Cummings	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 382 P SABER TOOTH Cir Gulf Breeze, FL 32563			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Elisabeth Ballmann	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 5613 E Morning Star Rd Cave Creek, AZ 85331			
Principal occupation / Job title (See instructions) Project Manager		Employer (See instructions) Desert Moon Rising	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>		
2 FILER NAME Gina O Jones		1 Total pages Schedule A1: 168 of 298
4 Date 3/3/2025	5 Full name of contributor Joan Barr 6 Contributor address; 300 NW 70th Ave # 206 Plantation, FL 33317	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See instructions) Manager		9 Employer (See instructions) self
Date 3/3/2025	Full name of contributor Melissa Bloom Contributor address; 1066 Beans Creek Rd Bakersville, NC 28705	Amount of contribution (\$) 10.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed
Date 3/3/2025	Full name of contributor Patricia Araiza Contributor address; 43300 Little River Airport Rd Spc 49 Little River, CA 95456	Amount of contribution (\$) 5.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed
Date 3/3/2025	Full name of contributor Annette Allgood Contributor address; 1308 N Ivanhoe St Alexandria, VA 22304	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 169 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2025	5 Full name of contributor Bruce J Ardinger	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 6735 Georgia Ave Bradenton, FL 34207			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Jose Arechiga	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 8208 Arroyo Way 8208 Arroyo Way Stockton, CA 95209			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Hiram Alfredo Rodríguez-Mora	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 11.00
Contributor address; 231 E 58th St # 3-D New York, NY 10022			
Principal occupation / Job title (See instructions) Painter/Sculptor		Employer (See instructions) Self	
Date 3/3/2025	Full name of contributor Jim Quigley	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 3191 Via Buena Vis Laguna Woods, CA 92637			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 170 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2025	5 Full name of contributor T. Price-Reuter	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 3.00
6 Contributor address; 1897 Steeple Ln Hastings, MN 55033			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Realtor		9 Employer (See instructions) Edina Realty	
Date 3/3/2025	Full name of contributor Timothy Rabroker	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 2.00
Contributor address; 893 Shaw Ln Killeen, TX 76542			City; State; Zip Code
Principal occupation / Job title (See instructions) Firefighter		Employer (See instructions) City of Killeen	
Date 3/3/2025	Full name of contributor Cynthia Ramseyer	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 238 El Granada Blvd Half Moon Bay, CA 94019			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Richard Ray	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 838 N Doheny Dr Apt 705 West Hollywood, CA 90069			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 171 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2025	5 Full name of contributor Lisa Shirley	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 302 N Market St Ste 300 Dallas, TX 75202			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Dean Omar Branham Shirley LLP	
Date 3/3/2025	Full name of contributor Jonathan Shakes	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 9211 SE 33rd St Mercer Island, WA 98040			City; State; Zip Code
Principal occupation / Job title (See instructions) Instructor		Employer (See instructions) Mathnasium	
Date 3/3/2025	Full name of contributor Destinee Serdinia	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 9116 Sailfish Dr Boerne, TX 78006			City; State; Zip Code
Principal occupation / Job title (See instructions) not employed		Employer (See instructions) none	
Date 3/3/2025	Full name of contributor Michael Ryan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 8.00
Contributor address; 34 Wolves Neck Rd Freeport, ME 04032			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 172 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2025	5 Full name of contributor Elizabeth Sanders	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 9.00
6 Contributor address; 2415 Croxley Ln Unit 5 Medford, OR 97501			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Myles Sanford	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 1332 N Cleaver St Apt 1F Chicago, IL 60642			City; State; Zip Code
Principal occupation / Job title (See instructions) Sr Creative		Employer (See instructions) Dentsu	
Date 3/3/2025	Full name of contributor Beryl Schmiedl	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 20 Winding Pond Rd Londonderry, NH 03053			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Jane Ward	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 125 Blantyre Ave Centerville, MA 02632			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 173 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2025	5 Full name of contributor Mary F Ward	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 20.00
6 Contributor address; 183 Guadalupe Dr Sonoma, CA 95476			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Matthew Weese	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 3624 Homestead Dr Mead, CO 80542			City; State; Zip Code
Principal occupation / Job title (See instructions) Environmental		Employer (See instructions) DMVA	
Date 3/3/2025	Full name of contributor Martha Wettemann	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 714 Darrow Dr Pleasant View, TN 37146			City; State; Zip Code
Principal occupation / Job title (See instructions) Statistical analyst supervisor		Employer (See instructions) State of TN	
Date 3/3/2025	Full name of contributor Tim Turner	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 6 S Star Gazer Santa Fe, NM 87506			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 174 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2025	5 Full name of contributor Regina Todd 6 Contributor address; 18 B Chance St Devens, MA 01434	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 20.00
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor William Strachman Contributor address; 88 Plympton St Waltham, MA 02451	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Principal occupation / Job title (See instructions) Antique car restorer		Employer (See instructions) Self	
Date 3/3/2025	Full name of contributor Richard Snyder Contributor address; 390 E Lake Rd Cossayuna, NY 12823	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Zak Nakhoda Contributor address; 12223 Cross Creek Dr Dallas, TX 75243	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Principal occupation / Job title (See instructions) Engineer		Employer (See instructions) TSA Group	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 175 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2025	5 Full name of contributor Penney OBrien	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 8173 Bridgegate Dr Huntersville, NC 28078			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor John Perry	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 1301 Hauser Blvd Los Angeles, CA 90019			City; State; Zip Code
Principal occupation / Job title (See instructions) Psychiatrist		Employer (See instructions) LA County	
Date 3/3/2025	Full name of contributor Kathleen Petty	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 20.00
Contributor address; 301 N Palm Canyon Dr Ste Pm 103 Palm Springs, CA 92262			City; State; Zip Code
Principal occupation / Job title (See instructions) retired		Employer (See instructions) N/A	
Date 3/3/2025	Full name of contributor David Plylar	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 4218 Misty Glade San Antonio, TX 78247			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 176 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2025	5 Full name of contributor Neal Pardee	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 3518 Dahlia Ave Los Angeles, CA 90026			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Karen Lee	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; PO Box 152 Ross, CA 94957			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Diane Lansinger	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 3303 129th Ave NE Bellevue, WA 98005			
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) Stealth	
Date 3/3/2025	Full name of contributor Alida Latham	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 2208 Fairview Ave E Seattle, WA 98102			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 177 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2025	5 Full name of contributor Cyndy Lane	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 2058 Why Worry Ln Eugene, OR 97405			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Ana Ma	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 1338 Hemlock St NW Washington, DC 20012			City; State; Zip Code
Principal occupation / Job title (See instructions) Partner		Employer (See instructions) Nexxus Consulting	
Date 3/3/2025	Full name of contributor Jerry Leventer	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 2.00
Contributor address; 485 Quincy Dr Mountain View, CA 94043			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 3/3/2025	Full name of contributor Jonathan Micocci	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 4791 Baywood Point Dr S Gulfport, FL 33711			City; State; Zip Code
Principal occupation / Job title (See instructions) realtor		Employer (See instructions) self	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 178 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/3/2025	5 Full name of contributor Glen Maxey	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 5200 Guadalupe St Austin, TX 78751			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Cheryl J Martin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 3140 Williams Rd The Villages, FL 32162			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/3/2025	Full name of contributor Suellyn Mcclung	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 506 S Fuller Ave Los Angeles, CA 90036			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 3/4/2025	Full name of contributor Sandra Lira	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 230 Lively Dr San Antonio, TX 78213			City; State; Zip Code
Principal occupation / Job title (See instructions) postal clerk		Employer (See instructions) USPS	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 179 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/4/2025	5 Full name of contributor Floris M I Kkelsen	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 5722 Keystone PI N Seattle, WA 98103			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) N/A	
Date 3/4/2025	Full name of contributor Robert Kuehlthau	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 819 Baylor Dr SE Huntsville, AL 35802			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A	
Date 3/4/2025	Full name of contributor Colin Osborne	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 286 Hawk Pine Rd Norwich, VT 05055			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/4/2025	Full name of contributor Do Nguyen	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 8260 Tobiano Dr Sacramento, CA 95829			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 180 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/4/2025	5 Full name of contributor Tracy Van Houten 6 Contributor address; 1691 E Woodbury Rd Pasadena, CA 91104	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See instructions) Spacecraft Systems Engineer		9 Employer (See instructions) JPL	
Date 3/4/2025	Full name of contributor Marcia Weber Contributor address; 138 W Hill Ter Painted Post, NY 14870	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/4/2025	Full name of contributor Mike Warren Contributor address; 206 E Locust St San Antonio, TX 78212	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Lawyer		Employer (See instructions) Self	
Date 3/4/2025	Full name of contributor Dale Schroedel Contributor address; 320 Rutledge St San Francisco, CA 94110	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Private Investigator and Political Organizer		Employer (See instructions) Self	
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<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 181 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/4/2025	5 Full name of contributor Pedro Villarreal	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 5.00
6 Contributor address; 324 Hoot Owl Hollow Rd Ingram, TX 78025			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/4/2025	Full name of contributor John Blendell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 3335 Military Rd NW Washington, DC 20015			City; State; Zip Code
Principal occupation / Job title (See instructions) professor		Employer (See instructions) Purdue University	
Date 3/4/2025	Full name of contributor Betsy Cotton	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 65 Evergreen Ln Berkeley, CA 94705			City; State; Zip Code
Principal occupation / Job title (See instructions) nonprofit management		Employer (See instructions) self	
Date 3/4/2025	Full name of contributor George Hedgpeth	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 2397 Turnpike Rd Raeford, NC 28376			City; State; Zip Code
Principal occupation / Job title (See instructions) Teacher		Employer (See instructions) UNC-Pembroke	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 182 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/4/2025	5 Full name of contributor Sarah Hedrick	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 24719 Faraday San Antonio, TX 78257			
8 Principal occupation / Job title (See instructions) Comms		9 Employer (See instructions) Booz Allen Hamilton	
Date 3/4/2025	Full name of contributor Jean Yates	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 1513 Maple St San Mateo, CA 94402			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/4/2025	Full name of contributor Mary Ann Witt-Ogorman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 17230 Beacon Woods San Antonio, TX 78248			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/5/2025	Full name of contributor Sonia Hernandez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 2014 Lee Hall San Antonio, TX 78201			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 183 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/5/2025	5 Full name of contributor Dayne Clark	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 5.00
6 Contributor address; PO Box 2278 Soldotna, AK 99669			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/5/2025	Full name of contributor Ann Marie Bleach	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 10925 Southern Highlands Pkwy Apt 1034 Las Vegas, NV 89141			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/5/2025	Full name of contributor Teresa Barnes	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 17681 Sunset Way Sonoma, CA 95476			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 3/5/2025	Full name of contributor Luis G. Moreno	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 41 Medici San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 184 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/5/2025	5 Full name of contributor Louis Lelaurin	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 1777 NE Loop 410 Ste 600 San Antonio, TX 78217			City; State; Zip Code
8 Principal occupation / Job title (See instructions) attorney		9 Employer (See instructions) Louis A. LeLaurin III P.C.	
Date 3/5/2025	Full name of contributor David Marne	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 211 Hunters Branch St S Shavano Park, TX 78231			City; State; Zip Code
Principal occupation / Job title (See instructions) Real Estate Broker		Employer (See instructions) Half Priced Real Estate	
Date 3/6/2025	Full name of contributor Sam Lane	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 2162 White Sands Way Fernandina Beach, FL 32034			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/6/2025	Full name of contributor Joan Lenane And Sally Rose	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; PO Box 681 Provincetown, MA 02657			City; State; Zip Code
Principal occupation / Job title (See instructions) Editor		Employer (See instructions) Self-Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 185 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/6/2025	5 Full name of contributor Kathy Rafferty	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 8526 Blackcastle Dr San Antonio, TX 78254			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/6/2025	Full name of contributor Georgia Prowse	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 807 Elizabeth Rd San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Bexar County DA	
Date 3/6/2025	Full name of contributor Randy Rice	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; PO Box 12387 San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) Realtor		Employer (See instructions) Self	
Date 3/6/2025	Full name of contributor Gail Reinhart	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 215 Center St Apt 1407 San Antonio, TX 78202			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 186 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/6/2025	5 Full name of contributor Jennifer Vazirian	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 8519 Ridge Stone St San Antonio, TX 78251			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Speech Pathologist		9 Employer (See instructions) Self	
Date 3/6/2025	Full name of contributor Polly Tally	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 331 Oakleaf Dr San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/6/2025	Full name of contributor James Bode	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 439 S Cole St Lima, OH 45805			City; State; Zip Code
Principal occupation / Job title (See instructions) none		Employer (See instructions) James Bode	
Date 3/6/2025	Full name of contributor Norma Ayee	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 703 N Lakeside Dr Lake Worth, FL 33460			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 187 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/6/2025	5 Full name of contributor Rosette Davila	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 1735 Diamond Rdg San Antonio, TX 78248			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) N/A	
Date 3/6/2025	Full name of contributor Lauri Dahl	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 1221 Wiltshire Ave San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Physical Therapist		Employer (See instructions) CHCS	
Date 3/6/2025	Full name of contributor Cynthia Bristol	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Contributor address; 113 Lyman Dr San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A	
Date 3/6/2025	Full name of contributor Edie Britton	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 150.00
Contributor address; 603 E Olmos Dr San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 188 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/6/2025	5 Full name of contributor Yvonne Haag	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 7310 Thrush Gdns San Antonio, TX 78209			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/6/2025	Full name of contributor Jana Keeland	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 7315 Thrush Gdns San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/6/2025	Full name of contributor Sherrie Graves	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 2018 Glendon Dr San Antonio, TX 78260			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A	
Date 3/6/2025	Full name of contributor Julene Franki	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 201 Ellwood St San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Artist		Employer (See instructions) Self	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>		
2 FILER NAME Gina O Jones		1 Total pages Schedule A1: 189 of 298
4 Date 3/6/2025	5 Full name of contributor Polly George 6 Contributor address; 331 Oakleaf Dr San Antonio, TX 78209	3 Filer ID (Ethics Commission Filers) 7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) N/A
Date 3/6/2025	Full name of contributor Lina Hidalgo For Harris County Contributor address; PO Box 88392 Houston, TX 77288	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A
Date 3/6/2025	Full name of contributor Rebekkah Zepeda Contributor address; 231 Millwood Ln San Antonio, TX 78216	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A
Date 3/7/2025	Full name of contributor Ben Williams Contributor address; 100 N Santa Rosa Apt 717 San Antonio, TX 78207	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Higher ed		Employer (See instructions) Trinity University
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 190 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/7/2025	5 Full name of contributor Karen Grimaldi	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 132 Jacksonville Rd Pompton Plains, NJ 07444			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/7/2025	Full name of contributor Elena Guajardo	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 6807 Farrow PI San Antonio, TX 78240			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/7/2025	Full name of contributor Peter Gollon	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 15 Eleanor PI Huntington, NY 11743			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/7/2025	Full name of contributor Ronald Katz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 20.00
Contributor address; PO Box 410 Saint Helena, CA 94574			
Principal occupation / Job title (See instructions) real estate investor		Employer (See instructions) self	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 191 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/7/2025	5 Full name of contributor Kenneth Harbaugh	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 18560 Parkland Dr Shaker Heights, OH 44122			City; State; Zip Code
8 Principal occupation / Job title (See instructions) President		9 Employer (See instructions) Team Rubicon Global	
Date 3/7/2025	Full name of contributor Gregory Hahn	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 1625 Northwood Dr Indianapolis, IN 46240			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Bose Public Affairs Group	
Date 3/7/2025	Full name of contributor Marc & Cristina Bensadoun	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 2915 Avalon Ave Berkeley, CA 94705			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/7/2025	Full name of contributor Ellen Berkowitz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 976 Niulani Rd Kapaa, HI 96746			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Greenberg Traurig LLP	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 192 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/7/2025	5 Full name of contributor Dwight Tipps	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 16150 County Road Ee Briscoe, TX 79011			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Farmer		9 Employer (See instructions) Dwight Tipps	
Date 3/7/2025	Full name of contributor David T Brogan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 126 Magnolia Dr San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/7/2025	Full name of contributor Randy A Robles	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 3406 Rizzoli Ave San Antonio, TX 78261			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/7/2025	Full name of contributor Jim Russo	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 3625 Meadow Grove Trl Ann Arbor, MI 48108			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 193 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/7/2025	5 Full name of contributor William OBrien	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 3838 Lockhill Selma Rd Apt 314 San Antonio, TX 78230			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/8/2025	Full name of contributor Josh Kollars	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 135 College Blvd San Antonio, TX 78209			
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) Joshua P Kollars MD PLLC	
Date 3/8/2025	Full name of contributor Michael Tapia	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 5006 Casa Grande St San Antonio, TX 78233			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/8/2025	Full name of contributor Tom Berry	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 5700 Rowlett Rd Rowlett, TX 75089			
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) Berry Family Services	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 194 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/8/2025	5 Full name of contributor Gene Carangal	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 6032 Akin Song San Antonio, TX 78261			City; State; Zip Code
8 Principal occupation / Job title (See instructions) IT Analyst		9 Employer (See instructions) USAA	
Date 3/8/2025	Full name of contributor Nonie Cabana	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 300.00
Contributor address; 9103 Cordes Jct Helotes, TX 78023			City; State; Zip Code
Principal occupation / Job title (See instructions) Faculty		Employer (See instructions) Alamo colleges	
Date 3/8/2025	Full name of contributor Rick D	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 2410 Cinco Woods San Antonio, TX 78259			City; State; Zip Code
Principal occupation / Job title (See instructions) Executive		Employer (See instructions) GFCU	
Date 3/8/2025	Full name of contributor Elsie Cortez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 23635 Verde Riv San Antonio, TX 78255			City; State; Zip Code
Principal occupation / Job title (See instructions) VP of Operations		Employer (See instructions) Dominion Mobile Wound Care Clinic	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 195 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/8/2025	5 Full name of contributor Kristina N. Kastl	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 3355 Blackburn St Apt 8402 Dallas, TX 75204			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) KASTL LAW P.C.	
Date 3/8/2025	Full name of contributor Love Duka	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 7039 San Pedro Ave Apt 212 San Antonio, TX 78216			City; State; Zip Code
Principal occupation / Job title (See instructions) Private Care Worker		Employer (See instructions) Self Employed	
Date 3/8/2025	Full name of contributor Marilou Delrosario	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 11811 Burning Bend St San Antonio, TX 78249			City; State; Zip Code
Principal occupation / Job title (See instructions) Caregiver		Employer (See instructions) Love Duka	
Date 3/9/2025	Full name of contributor Margaret Dudley	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 727.00
Contributor address; 203 Wellesley Loop San Antonio, TX 78231			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 196 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/9/2025	5 Full name of contributor Linda Fischman	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
	6 Contributor address; 29 Grand Hill Dr Dover, MA 02030	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/9/2025	Full name of contributor Marcus Guerra	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
	Contributor address; 10613 Centre Glade Dr Houston, TX 77043	City; State; Zip Code	
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Enterprise Products	
Date 3/9/2025	Full name of contributor Stacie Hare	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
	Contributor address; 18713 Brookwood Frst San Antonio, TX 78258	City; State; Zip Code	
Principal occupation / Job title (See instructions) Managing Director of Impact		Employer (See instructions) City Year	
Date 3/9/2025	Full name of contributor Jack Henkin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
	Contributor address; 1520 Oakwood Ave Highland Park, IL 60035	City; State; Zip Code	
Principal occupation / Job title (See instructions) Visiting Scholar		Employer (See instructions) Northwestern University	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 197 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/9/2025	5 Full name of contributor Constance Christopher	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 23 E 10th St New York, NY 10003			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Artist		9 Employer (See instructions) Self-employed	
Date 3/9/2025	Full name of contributor Ernest Bustillos	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 813 Los Olivos Dr San Gabriel, CA 91775			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/9/2025	Full name of contributor Anthony Bardin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; PO Box 58 Carson, NM 87517			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/9/2025	Full name of contributor David Barber	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 604 Butler PI Wausau, WI 54401			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 198 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/9/2025	5 Full name of contributor Cedric Bainton	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 3.00
6 Contributor address; 50 Ventura Ave San Francisco, CA 94116			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/9/2025	Full name of contributor Lesley Rubin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 21102 Sonoma San Antonio, TX 78259			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/9/2025	Full name of contributor Brandon Smith	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 907 E Sayles Dr Palatine, IL 60074			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/9/2025	Full name of contributor Jan Reed	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 2268 E Walnut St Evansville, IN 47714			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 199 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/9/2025	5 Full name of contributor Mary Ann Mcgonigle	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 126 W 11th St Apt 43 New York, NY 10011			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/9/2025	Full name of contributor Barry Nall	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; PO Box 205 Comfort, TX 78013			City; State; Zip Code
Principal occupation / Job title (See instructions) not employed		Employer (See instructions) none	
Date 3/9/2025	Full name of contributor Erika Moritsugu	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 701 3rd St NE Washington, DC 20002			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Anti-Defamation League	
Date 3/10/2025	Full name of contributor Holly Mosher	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 1707 Hill St Santa Monica, CA 90405			City; State; Zip Code
Principal occupation / Job title (See instructions) filmmaker		Employer (See instructions) self	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 200 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/10/2025	5 Full name of contributor Anna Moffett	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 1214 Timbergrove Ln Houston, TX 77008			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Consultant		9 Employer (See instructions) AM Strategies	
Date 3/10/2025	Full name of contributor Ellen Marshall	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 242 Wyanoke Dr San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/10/2025	Full name of contributor Suzanne Martinez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Contributor address; 202 Lavaca St San Antonio, TX 78210			City; State; Zip Code
Principal occupation / Job title (See instructions) professor		Employer (See instructions) Alamo Colleges	
Date 3/10/2025	Full name of contributor Deborah Sanders	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; PO Box 455 Provincetown, MA 02657			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 201 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/10/2025	5 Full name of contributor Maryross Taylor	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; PO Box 667398 Houston, TX 77266			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/10/2025	Full name of contributor Karen Twitchell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 9 Courtlandt Pl Houston, TX 77006			
Principal occupation / Job title (See instructions) Self-employed		Employer (See instructions) self-employed	
Date 3/10/2025	Full name of contributor Rhonda Chase	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 3614 Ridge Country St San Antonio, TX 78247			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/10/2025	Full name of contributor Seth Hulkower	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 222 Park Ave S New York, NY 10003			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 202 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/11/2025	5 Full name of contributor Kristen Kavanaugh	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 900.00
6 Contributor address; 2800 Del Curto Rd Apt 5 Austin, TX 78704			City; State; Zip Code
8 Principal occupation / Job title (See instructions) CEO		9 Employer (See instructions) The Agency Initiative	
Date 3/11/2025	Full name of contributor Lisa Honig	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 320 Rutledge St San Francisco, CA 94110			City; State; Zip Code
Principal occupation / Job title (See instructions) weaver		Employer (See instructions) self	
Date 3/11/2025	Full name of contributor Jon Goerner	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 4423 Cole Ave Apt 103 Dallas, TX 75205			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/11/2025	Full name of contributor Sharon Glassner	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 3.00
Contributor address; 9246 Menard Ave Morton Grove, IL 60053			City; State; Zip Code
Principal occupation / Job title (See instructions) not employed		Employer (See instructions) none	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 203 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/11/2025	5 Full name of contributor Eduardo Flores	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 8323 Sierra Hermosa San Antonio, TX 78255			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Self	
Date 3/11/2025	Full name of contributor Jan Fanette	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 112 Lindell PI Unit 2202 San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) Fanette Co dba Blackline	
Date 3/11/2025	Full name of contributor Alicia Diehl	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 2640 Martin Rd Dripping Springs, TX 78620			City; State; Zip Code
Principal occupation / Job title (See instructions) Engineer		Employer (See instructions) Self	
Date 3/11/2025	Full name of contributor Vanessa Perez-King	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 11310 Fair Hollow Dr San Antonio, TX 78249			City; State; Zip Code
Principal occupation / Job title (See instructions) Senior Product Owner		Employer (See instructions) USAA	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 204 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/11/2025	5 Full name of contributor Mark Bohannon	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 2510 Virginia Ave NW Apt 907-N Washington, DC 20037			
8 Principal occupation / Job title (See instructions) Self-employed		9 Employer (See instructions) Self-employed	
Date 3/11/2025	Full name of contributor Sheree Bodary	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 588 Eleanor Rd Victor, NY 14564			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/11/2025	Full name of contributor Thomas C Vinson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 1806 N Husband St Stillwater, OK 74075			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/11/2025	Full name of contributor Cynthia Surratt	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 4606 Belinda Lee St San Antonio, TX 78220			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 205 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/11/2025	5 Full name of contributor Patricia Stevens	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 3306 Evergreen Glade Dr Kingwood, TX 77339			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not employed		9 Employer (See instructions) Not employed	
Date 3/11/2025	Full name of contributor Arlene Schler	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 155 Clairemont Ave Apt 547 Decatur, GA 30030			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/11/2025	Full name of contributor M Robbins	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1.00
Contributor address; 2600 La Ronde St Austin, TX 78731			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/11/2025	Full name of contributor Andy Mcgarrahan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 2.00
Contributor address; 7110 Canongate Dr Dallas, TX 75248			City; State; Zip Code
Principal occupation / Job title (See instructions) Psychologist		Employer (See instructions) Self	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 206 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/11/2025	5 Full name of contributor Chantale Wong	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 750.00
6 Contributor address; 2314 39th St NW Washington, DC 20007			City; State; Zip Code
8 Principal occupation / Job title (See instructions) SVP		9 Employer (See instructions) Amida Technology Solutions	
Date 3/12/2025	Full name of contributor Jennifer Mills	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 735 Broad St Ste 218 Chattanooga, TN 37402			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 3/12/2025	Full name of contributor Richard Mcpike	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 1325 N Ivanhoe St Alexandria, VA 22304			City; State; Zip Code
Principal occupation / Job title (See instructions) Chief of Staff		Employer (See instructions) Congressman Mark Takano	
Date 3/12/2025	Full name of contributor Denise Moore	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Contributor address; 515 Cedar St San Antonio, TX 78210			City; State; Zip Code
Principal occupation / Job title (See instructions) analyst		Employer (See instructions) self	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 207 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/12/2025	5 Full name of contributor Marcia Namowitz	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 199 Montecito Cres Melville, NY 11747			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/12/2025	Full name of contributor Jennifer Miller Paci	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 516 Tremont St Boston, MA 02116			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/12/2025	Full name of contributor Steven Kirkland	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 2330 FM 2112 Nacogdoches, TX 75961			City; State; Zip Code
Principal occupation / Job title (See instructions) Mediator/Arbitrator		Employer (See instructions) self	
Date 3/12/2025	Full name of contributor Tiffany Muller	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 3305 Alabama Ave SE Washington, DC 20020			City; State; Zip Code
Principal occupation / Job title (See instructions) President		Employer (See instructions) End Citizens United	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 208 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/12/2025	5 Full name of contributor Deanne Cuellar	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 289 W Hermosa Dr San Antonio, TX 78212			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Tech		9 Employer (See instructions) ILSR	
Date 3/12/2025	Full name of contributor Wendy Greuel	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 4464 Bergamo Dr Encino, CA 91436			City; State; Zip Code
Principal occupation / Job title (See instructions) Consultant Exec. in Residence National Advisor		Employer (See instructions) self CSUN Manatt	
Date 3/12/2025	Full name of contributor Jason Kaufman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 36.00
Contributor address; 1325 N Ivanhoe St Alexandria, VA 22304			City; State; Zip Code
Principal occupation / Job title (See instructions) Cantor		Employer (See instructions) Beth El Hebrew Congregation	
Date 3/13/2025	Full name of contributor Nancy Johnson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 250 W El Dorado Blvd Apt 701 Friendswood, TX 77546			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 209 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/13/2025	5 Full name of contributor Barbara Grasseschi	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 959.70
6 Contributor address; 1083 Vine St # MB249 Healdsburg, CA 95448			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Farmer		9 Employer (See instructions) Puma Springs Vineyards	
Date 3/13/2025	Full name of contributor Mia Duran	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 7927 Peaceful Glade San Antonio, TX 78254			City; State; Zip Code
Principal occupation / Job title (See instructions) Account Manager		Employer (See instructions) Project Nia	
Date 3/13/2025	Full name of contributor Alice Evergreen	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 1506 Scharpe St Houston, TX 77023			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/13/2025	Full name of contributor Conrad Deanda	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 201 Spruce Ave Dumas, TX 79029			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 210 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/13/2025	5 Full name of contributor Rosemary Colson	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 4436 Meandering Way # 201 Tallahassee, FL 32308			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/13/2025	Full name of contributor Kiran Bains	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 122 Jeanette Dr San Antonio, TX 78216			
Principal occupation / Job title (See instructions) Self-employed		Employer (See instructions) Kiran Kaur Bains	
Date 3/13/2025	Full name of contributor Deborah Miller	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 23 Inwood Autumn San Antonio, TX 78248			
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) The TESH Project LLC	
Date 3/13/2025	Full name of contributor Scott Robinson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 625 Olima St Sausalito, CA 94965			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 211 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/13/2025	5 Full name of contributor Nancy Serrurier	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 1000.00
6 Contributor address; 503 Old La Honda Rd Woodside, CA 94062			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/13/2025	Full name of contributor Jill Zimmerman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 7722 Toumey Oak Dr San Antonio, TX 78223			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/14/2025	Full name of contributor Susan Richardson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 239.90
Contributor address; 1322 Martin Ave Palo Alto, CA 94301			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A	
Date 3/14/2025	Full name of contributor Cate Weber	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 734 E Woodlawn Ave San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 212 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/14/2025	5 Full name of contributor Anneli Kunze	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 404 E Myrtle St Apt 2 San Antonio, TX 78212			City; State; Zip Code
8 Principal occupation / Job title (See instructions) TNC Driver		9 Employer (See instructions) Self	
Date 3/14/2025	Full name of contributor Daniel Pacheco	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 1117 Lamar St San Antonio, TX 78202			City; State; Zip Code
Principal occupation / Job title (See instructions) Strategic Account Manager		Employer (See instructions) BD (Becton Dickinson)	
Date 3/14/2025	Full name of contributor Mary Lu Murphy	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 244 Avalon Dr Pacific, CA 94044			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/14/2025	Full name of contributor Mitchel Aranda	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 1419 Nolan St San Antonio, TX 78202			City; State; Zip Code
Principal occupation / Job title (See instructions) Business Analyst		Employer (See instructions) USAA Federal Savings Bank	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 213 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/14/2025	5 Full name of contributor Raquel Aguilar	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 800.00
6 Contributor address; 1818 Paso Del Sur St San Antonio, TX 78207			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Technical Writer		9 Employer (See instructions) Wincorp Solutions	
Date 3/14/2025	Full name of contributor Betsy Berman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 1084 Saint Louis PI NE Atlanta, GA 30306			City; State; Zip Code
Principal occupation / Job title (See instructions) General Contractor		Employer (See instructions) Self	
Date 3/14/2025	Full name of contributor Cynthia Benton	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 2311 Kelso San Antonio, TX 78248			City; State; Zip Code
Principal occupation / Job title (See instructions) Project Manager		Employer (See instructions) Wells Fargo	
Date 3/14/2025	Full name of contributor Linda Cortez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 16406 Crested Butte St San Antonio, TX 78247			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 214 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/14/2025	5 Full name of contributor Sarah Cowen	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 801 W Jonquil Ave Mcallen, TX 78501			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Cowen	
Date 3/14/2025	Full name of contributor Raymond Fisk	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 2710 Summit Ridge Dr San Marcos, TX 78666			City; State; Zip Code
Principal occupation / Job title (See instructions) Professor		Employer (See instructions) Texas State University	
Date 3/14/2025	Full name of contributor Linda Kamran	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 410 Cervantes Rd Portola Valley, CA 94028			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/14/2025	Full name of contributor Amanda Harris Salazar	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 1626 Pitcher Bnd San Antonio, TX 78253			City; State; Zip Code
Principal occupation / Job title (See instructions) Licensing analyst		Employer (See instructions) Amanda Harris-Salazar	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 215 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/14/2025	5 Full name of contributor Janine Guillot	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 2424 Castro St San Francisco, CA 94131			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Self-employed		9 Employer (See instructions) Janine Guillot	
Date 3/15/2025	Full name of contributor Amy Estes	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 1711 Alta Vista Ave Austin, TX 78704			City; State; Zip Code
Principal occupation / Job title (See instructions) TA		Employer (See instructions) UTSA	
Date 3/15/2025	Full name of contributor Mary Green	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 116 Bryn Mawr Dr San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/15/2025	Full name of contributor Karen Grimaldi	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 132 Jacksonville Rd Pompton Plains, NJ 07444			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 216 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/15/2025	5 Full name of contributor Donald Cole	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 89 County Road A052 Estancia, NM 87016			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/15/2025	Full name of contributor Mary Braunagel-Brown	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 150.00
Contributor address; 7321 Roaring Springs Dr Austin, TX 78736			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 3/15/2025	Full name of contributor Susan Burnside	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 1311 S Tremaine Ave Los Angeles, CA 90019			City; State; Zip Code
Principal occupation / Job title (See instructions) Political Consultant		Employer (See instructions) Self	
Date 3/15/2025	Full name of contributor David Brogan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 126 Magnolia Dr San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 217 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/15/2025	5 Full name of contributor Allison Binder	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 24829 Jacob Hamblin Rd Hidden Hills, CA 91302			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Ggssc	
Date 3/15/2025	Full name of contributor William OBrien	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 3838 Lockhill Selma Rd Apt 314 San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/15/2025	Full name of contributor Gerard Novak	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 51 Bailly Dr Burlington, NJ 08016			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A	
Date 3/15/2025	Full name of contributor Mary Lanoue	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 106 Terra Cotta Universal City, TX 78148			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 218 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/15/2025	5 Full name of contributor Charles Ledley	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 129 Charles St Boston, MA 02114			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Investor		9 Employer (See instructions) Liminality Capital LP	
Date 3/15/2025	Full name of contributor Mary B Lockhart	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 107 E Lockhart Ave Alpine, TX 79830			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/15/2025	Full name of contributor Deborah Tucker	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 4612 Shoal Creek Blvd Austin, TX 78756			City; State; Zip Code
Principal occupation / Job title (See instructions) training consulting advocacy		Employer (See instructions) National Center on Domestic and Sexual Violence	
Date 3/16/2025	Full name of contributor Michael Tapia	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 5006 Casa Grande St San Antonio, TX 78233			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 219 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/16/2025	5 Full name of contributor Tito Refi	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 1238 Misty Lake Ct Sugar Land, TX 77498			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/16/2025	Full name of contributor Joseph Lamping	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 2.00
Contributor address; 5363 Northbend Xing Cincinnati, OH 45247			City; State; Zip Code
Principal occupation / Job title (See instructions) Personal Shopper		Employer (See instructions) Sams Club	
Date 3/16/2025	Full name of contributor Craig O'Brien	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 3421 W Chester Pike Apt A11 Newtown Square, PA 19073			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/16/2025	Full name of contributor Tina Amper	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 2323 Clear Lake City Blvd Ste Pm 180 Houston, TX 77062			City; State; Zip Code
Principal occupation / Job title (See instructions) advisor		Employer (See instructions) next source	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 220 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/16/2025	5 Full name of contributor Doe Florsheim	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 1910 Wroxton Rd Houston, TX 77005			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not employed		9 Employer (See instructions) Not employed	
Date 3/16/2025	Full name of contributor Ernest Bustillos	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 813 Los Olivos Dr San Gabriel, CA 91775			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/16/2025	Full name of contributor Jamie Gonzalez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 3103 Marley Rock San Antonio, TX 78253			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/16/2025	Full name of contributor Bears Rebecca Fonte	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 375.00
Contributor address; 13225 Hymeadow Cir Austin, TX 78729			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 221 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/16/2025	5 Full name of contributor Conrad Deanda 6 Contributor address; 201 Spruce Ave Dumas, TX 79029	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 5.00
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/17/2025	Full name of contributor Christin Fite Contributor address; 7405 Cinnabar Ter Gaithersburg, MD 20879	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Senior Sales Director		Employer (See instructions) Causal	
Date 3/17/2025	Full name of contributor Ronald Katz Contributor address; PO Box 410 Saint Helena, CA 94574	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) real estate investor		Employer (See instructions) self	
Date 3/17/2025	Full name of contributor Rosie Abriam Contributor address; 1681 Fluorite Ct Livermore, CA 94550	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 222 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/17/2025	5 Full name of contributor Josephine Bayan	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 11045 SE 184th PI Renton, WA 98055			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Sr. Project Manager		9 Employer (See instructions) Rock PM Services	
Date 3/17/2025	Full name of contributor William OBrien	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 3.00
Contributor address; 3838 Lockhill Selma Rd Apt 314 San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/17/2025	Full name of contributor Jamie Palmieri-Guy	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 18004 Hood Ave Homewood, IL 60430			City; State; Zip Code
Principal occupation / Job title (See instructions) Highe Ed Admin		Employer (See instructions) The University of Chicago	
Date 3/17/2025	Full name of contributor Robert Ruiz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 3.00
Contributor address; PO Box 291221 San Antonio, TX 78229			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 223 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/17/2025	5 Full name of contributor Anna Yap	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 3315 Just Because San Antonio, TX 78245			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Cyber		9 Employer (See instructions) AYap	
Date 3/17/2025	Full name of contributor EDF Action Texas PAC	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 301 Congress Ave Ste 1300 Austin, TX 78701			City; State; Zip Code
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date 3/17/2025	Full name of contributor Families for Education and Opportunity	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 415 Mary Louise Dr San Antonio, TX 78201			City; State; Zip Code
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date 3/18/2025	Full name of contributor Francey Youngberg	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Contributor address; 7505 Elba Rd Alexandria, VA 22306			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 224 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/18/2025	5 Full name of contributor Benjamin Young	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 1000.00
6 Contributor address; 2900 McKinley St NW Washington, DC 20015			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Public Affairs		9 Employer (See instructions) Georgetown Public Affairs LLC	
Date 3/18/2025	Full name of contributor Kevin Acebo	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 300.00
Contributor address; 3446 Gundry Ave Long Beach, CA 90807			City; State; Zip Code
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) Self Employed	
Date 3/18/2025	Full name of contributor David Catania	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 2122 Newport PI NW Washington, DC 20037			City; State; Zip Code
Principal occupation / Job title (See instructions) Lawyer		Employer (See instructions) Georgetown Public Affairs	
Date 3/19/2025	Full name of contributor Barbara Bailey	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 249 E Kelso St Tucson, AZ 85705			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 225 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/19/2025	5 Full name of contributor Salome Balecha	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 9165 Wooden Heights Ct Las Vegas, NV 89139			
8 Principal occupation / Job title (See instructions) Real Estate Agent		9 Employer (See instructions) Self Employeed	
Date 3/19/2025	Full name of contributor Dennis Karbach	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 315 W Lynwood Ave San Antonio, TX 78212			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/19/2025	Full name of contributor Anne Johnson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 846 Binbrook Dr Mesquite, TX 75149			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/19/2025	Full name of contributor Sharon Glassner	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 3.00
Contributor address; 9246 Menard Ave Morton Grove, IL 60053			
Principal occupation / Job title (See instructions) not employed		Employer (See instructions) none	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 226 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/19/2025	5 Full name of contributor Mark Garrett	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 1726 Fredericksburg Rd Ste 103 San Antonio, TX 78201			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/19/2025	Full name of contributor Cynthia Surratt	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 4606 Belinda Lee St San Antonio, TX 78220			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/19/2025	Full name of contributor Anne Tucker	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 803 Atwell St Bellaire, TX 77401			
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 3/19/2025	Full name of contributor Vita Wells	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 1964 Hopkins St Berkeley, CA 94707			
Principal occupation / Job title (See instructions) Artist		Employer (See instructions) Self	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 227 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/19/2025	5 Full name of contributor Luisa Park	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
	6 Contributor address; 5075 Sienna Ln Sacramento, CA 95835	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/19/2025	Full name of contributor Colin Osborne	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
	Contributor address; 286 Hawk Pine Rd Norwich, VT 05055	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/19/2025	Full name of contributor William OBrien	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 3.00
	Contributor address; 3838 Lockhill Selma Rd Apt 314 San Antonio, TX 78230	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/19/2025	Full name of contributor Beth Murray	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
	Contributor address; 3710 Scenic Valley Dr Kingwood, TX 77345	City; State; Zip Code	
Principal occupation / Job title (See instructions) Flight Attendant		Employer (See instructions) American Airlines	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 228 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/19/2025	5 Full name of contributor Louise Moreno	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 1445 Gosenbacher Rd San Antonio, TX 78245			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/19/2025	Full name of contributor Kate McLachlan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 223 Delaware St San Antonio, TX 78210			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/19/2025	Full name of contributor Andy McGarrahan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 2.00
Contributor address; 7110 Canongate Dr Dallas, TX 75248			City; State; Zip Code
Principal occupation / Job title (See instructions) Psychologist		Employer (See instructions) Self	
Date 3/19/2025	Full name of contributor Suzanne Martinez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 202 Lavaca St San Antonio, TX 78210			City; State; Zip Code
Principal occupation / Job title (See instructions) professor		Employer (See instructions) Alamo Colleges	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 229 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/19/2025	5 Full name of contributor Philippa Martinez	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 1303 Azie Morton Rd Austin, TX 78704			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Comms		9 Employer (See instructions) Frontwood	
Date 3/20/2025	Full name of contributor Lenora Mckenzie	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 1038 W Kings Hwy San Antonio, TX 78201			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 3/20/2025	Full name of contributor Jonathan Micocci	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 4791 Baywood Point Dr S Gulfport, FL 33711			City; State; Zip Code
Principal occupation / Job title (See instructions) realtor		Employer (See instructions) self	
Date 3/20/2025	Full name of contributor Sherry Merfish	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 709 E 8th St Houston, TX 77007			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 230 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Sharon Mize	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 15.00
6 Contributor address; 1302 Vista Del Rio San Antonio, TX 78216			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Sima Ladjevardian	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 8830 Stable Ln Houston, TX 77024			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Jer-Adrienne Lelliott	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 1060 E Orange Grove Blvd Apt 1 Pasadena, CA 91104			City; State; Zip Code
Principal occupation / Job title (See instructions) Executive Director		Employer (See instructions) Newcomers Access Center	
Date 3/20/2025	Full name of contributor Julia Love	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; PO Box 59 Rio Medina, TX 78066			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 231 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Marjorie Lovell	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 1242 W Oceanfront Newport Beach, CA 92661			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Stephen Lopez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 1440 E Linda Vista Dr Flagstaff, AZ 86004			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Hollis Lewis	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 2850 FM 1600 Cameron, TX 76520			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) self	
Date 3/20/2025	Full name of contributor Jeanette Moore	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 1306 Fern Shadow Cv San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 232 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Dana Monroe	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 2760 E 4th St Apt 222 National City, CA 91950			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Lawrence Murray	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 13 Village Ln Daly City, CA 94015			
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) self employed	
Date 3/20/2025	Full name of contributor Ron Mundstock	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 317 Lexington Ave Apt 355 San Antonio, TX 78215			
Principal occupation / Job title (See instructions) Program Analyst		Employer (See instructions) DoD	
Date 3/20/2025	Full name of contributor Alicia Mossman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 10125 Galleon Ln Socorro, TX 79927			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 233 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Piper Nelson	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 3206 Harris Park Ave Austin, TX 78705			
8 Principal occupation / Job title (See instructions) Executive Director		9 Employer (See instructions) I Live Here I Give Here	
Date 3/20/2025	Full name of contributor Susan Newman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 1523 Portola Ave Palo Alto, CA 94306			
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) none	
Date 3/20/2025	Full name of contributor Yvonne Pacheco	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 12110 Chi Chis Cv San Antonio, TX 78221			
Principal occupation / Job title (See instructions) CNA		Employer (See instructions) Unios	
Date 3/20/2025	Full name of contributor Michael Plaschko	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 15134 Trailside Dr Houston, TX 77095			
Principal occupation / Job title (See instructions) Flight Attendant		Employer (See instructions) United	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 234 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Melanie Pokluda	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 725 Patterson Ave Austin, TX 78703			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Jesse Pina	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 4410 Essex PI San Antonio, TX 78249			City; State; Zip Code
Principal occupation / Job title (See instructions) Environmental		Employer (See instructions) CAP Construction and Environmental LLC	
Date 3/20/2025	Full name of contributor Eduardo Perez Jr	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 7210 Tides Trl San Antonio, TX 78252			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Celeste Werfel	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 9.00
Contributor address; 3127 Franklin Ln Rockaway, NJ 07866			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 235 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Laura Whitworth	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 5.00
6 Contributor address; 3916 Forest Ave Mountain Brk, AL 35213			
8 Principal occupation / Job title (See instructions) Not employed		9 Employer (See instructions) Not employed	
Date 3/20/2025	Full name of contributor Diana Weihs	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 1715 Cromwell HI Austin, TX 78703			
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) Central texas ob-gyn association	
Date 3/20/2025	Full name of contributor Monica Turner	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 21 Starlit Cir Sacramento, CA 95831			
Principal occupation / Job title (See instructions) Surveyor		Employer (See instructions) Dept. Of Transportation	
Date 3/20/2025	Full name of contributor Margaret Vanderkar	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 3.00
Contributor address; PO Box 3488 Diamond Springs, CA 95619			
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 236 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Mark Wagner	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 15.00
6 Contributor address; 2523 Abaca Way Fremont, CA 94539			
8 Principal occupation / Job title (See instructions) Software Release Engineer		9 Employer (See instructions) Sonics Inc.	
Date 3/20/2025	Full name of contributor Robert Steiner	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; PO Box 2317 Salt Lake City, UT 84110			
Principal occupation / Job title (See instructions) Executive		Employer (See instructions) Alisco Inc.	
Date 3/20/2025	Full name of contributor Mark Smith	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 786 Great Hwy Apt 1 San Francisco, CA 94121			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Charles Spurr	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 139 Broadway St Wakefield, MA 01880			
Principal occupation / Job title (See instructions) Software Engineer retired		Employer (See instructions) retired	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 237 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Myles Sanford	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 1332 N Cleaver St Apt 1F Chicago, IL 60642			
8 Principal occupation / Job title (See instructions) Sr Creative		9 Employer (See instructions) Dentsu	
Date 3/20/2025	Full name of contributor Nathan Shapiro	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 242 Impala Trce San Antonio, TX 78258			
Principal occupation / Job title (See instructions) Manager		Employer (See instructions) Jmp	
Date 3/20/2025	Full name of contributor David Shen	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 4615 116th Ave SE Bellevue, WA 98006			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Mark Silverman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 7404 Brookville Rd Chevy Chase, MD 20815			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 238 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Andrew Sikes	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 31787 Chapel Rock Ln Spring, TX 77386			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Programmer		9 Employer (See instructions) Self	
Date 3/20/2025	Full name of contributor Tracy Rothstein	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 174 Watercolor Way Ste Pm 103 Santa Rosa Beach, FL 32459			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Pamela Quentin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 2.00
Contributor address; 1666 Point Conception Ct Chula Vista, CA 91911			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Joshua Price	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 1151 E 14th St Jacksonville, FL 32206			City; State; Zip Code
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) Self	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 239 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Jaime Garmendia	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 135 Ocean Ave W Salem, MA 01970			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Senior Project Manager		9 Employer (See instructions) MBTA	
Date 3/20/2025	Full name of contributor Cullen Geiselman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 2139 Stanmore Dr Houston, TX 77019			City; State; Zip Code
Principal occupation / Job title (See instructions) investor		Employer (See instructions) Bald Cypress Ltd	
Date 3/20/2025	Full name of contributor Karen Grimaldi	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 132 Jacksonville Rd Pompton Plains, NJ 07444			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Mary Green	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 116 Bryn Mawr Dr San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 240 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Cassandra Dickson	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 638 NW Skyline Crest Rd Portland, OR 97229			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Writer		9 Employer (See instructions) Self	
Date 3/20/2025	Full name of contributor Sharon Duncan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 14601 Locustwood Ln Silver Spring, MD 20905			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Jerry Duterroil	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 702 Lost Cyn San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 3/20/2025	Full name of contributor Ben Kahrl	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 11 Alba Rd Wellesley, MA 02481			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 241 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Patricia Jasso	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 326 Anton Dr San Antonio, TX 78223			
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) N/A	
Date 3/20/2025	Full name of contributor Sahiti Karempudi	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 1409 Holly St Austin, TX 78702			
Principal occupation / Job title (See instructions) program coordinator		Employer (See instructions) City of Austin	
Date 3/20/2025	Full name of contributor Carolyn Knight	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 18008 Calico Cir Olney, MD 20832			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Jean King	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 4205 Colgate Way Livermore, CA 94550			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 242 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Randi Klein	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 3.00
6 Contributor address; 1841 Arroyo Chamiso Santa Fe, NM 87505			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Mary Hammond	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 3.00
Contributor address; 75 Thayer St Apt 6A New York, NY 10040			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Erica Harris	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 2331 Dunmore HI San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Sonia Hernandez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 2014 Lee Hall San Antonio, TX 78201			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 243 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Mary Head	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 15.00
6 Contributor address; 15315 NE 190th Ct Brush Prairie, WA 98606			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Lucille Barish	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 200 Riverside Dr Apt 6A New York, NY 10025			
Principal occupation / Job title (See instructions) Psychotherapist		Employer (See instructions) Self	
Date 3/20/2025	Full name of contributor Lelaine Bigelow	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 1106 Park St NE Washington, DC 20002			
Principal occupation / Job title (See instructions) Director		Employer (See instructions) National Partnership for Women & Families	
Date 3/20/2025	Full name of contributor Karen Board	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 3017 Lakefield Dr Little Elm, TX 75068			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 244 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Melissa Bloom	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 5.00
6 Contributor address; 1066 Beans Creek Rd Bakersville, NC 28705			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Mono Aguilar	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 635 Marquette Dr San Antonio, TX 78228			City; State; Zip Code
Principal occupation / Job title (See instructions) Educator		Employer (See instructions) Alamo colleges	
Date 3/20/2025	Full name of contributor Catalina Aguirre	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 15010 Short Trl San Antonio, TX 78245			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Thomas Fine	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; PO Box 324 Harbert, MI 49115			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 245 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Kim Catherall	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 230 Melrose St Bellevue, ID 83313			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Kim Cauthorn	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 314 W Elsmere PI San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Willis Towers Watson	
Date 3/20/2025	Full name of contributor Mary Cefalu	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 176 N Winchester Blvd Santa Clara, CA 95050			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Stephanie Childs	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 3501 Ranch Road 620 S Austin, TX 78738			City; State; Zip Code
Principal occupation / Job title (See instructions) PR		Employer (See instructions) FleishmanHillard	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 246 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Kiara Carrillo	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 1.00
6 Contributor address; 5407 Wincheap Farm San Antonio, TX 78228			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Tech		9 Employer (See instructions) Full Spectrum	
Date 3/20/2025	Full name of contributor Martin Carrillo	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 3672 San Pasqual St Pasadena, CA 91107			City; State; Zip Code
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) Independent contractor	
Date 3/20/2025	Full name of contributor William Boland	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 2645 S Bayshore Dr Apt 301 Miami, FL 33133			City; State; Zip Code
Principal occupation / Job title (See instructions) Physiologist		Employer (See instructions) BodyFix Method	
Date 3/20/2025	Full name of contributor Hector Colon	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 3.00
Contributor address; 950 Briarwood Blvdne Palm Bay, FL 32905			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 247 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Gretchen Christensen	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 15.00
6 Contributor address; 9140 Los Lagos Ct Bonita Springs, FL 34135			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Maricella Cruz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 7460 Kitty Hawk Rd Lot 177 Converse, TX 78109			City; State; Zip Code
Principal occupation / Job title (See instructions) Customer service		Employer (See instructions) Bunzl sw	
Date 3/20/2025	Full name of contributor Peter Curtin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 809 Lamplight Dr La Jolla, CA 92037			City; State; Zip Code
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) City of Hope	
Date 3/20/2025	Full name of contributor Maurice Zeitlin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 930 California Ave Unit 306 Santa Monica, CA 90403			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 248 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2025	5 Full name of contributor Lesley Zepeda	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 20.00
6 Contributor address; 410 E Glenview Dr San Antonio, TX 78201			
8 Principal occupation / Job title (See instructions) Practice Manager		9 Employer (See instructions) Angel of Mercy	
Date 3/20/2025	Full name of contributor Patrick Williams	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 287 Kelton Ave San Carlos, CA 94070			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/20/2025	Full name of contributor Bob Wheeler	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 4946 Tinderbox Cir Manlius, NY 13104			
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 3/20/2025	Full name of contributor Rob Bonta for CA Atty General 2026	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 1700 Tribute Rd Ste 201 Sacramento, CA 95815			
Principal occupation / Job title (See instructions)		Employer (See instructions)	

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 249 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/21/2025	5 Full name of contributor Ellina Yin	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 1030 W San Fernando St Unit 1 San Jose, CA 95126			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Consultant		9 Employer (See instructions) Onlyin IIC	
Date 3/21/2025	Full name of contributor Aileen Corelli	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 40.00
Contributor address; 34 Brees Blvd. San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A	
Date 3/21/2025	Full name of contributor Valerie Booze	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 5133 Long Pointe Rd Wilmington, NC 28409			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/21/2025	Full name of contributor Merrell Botello	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 1716 La Mancha Pomona, CA 91768			City; State; Zip Code
Principal occupation / Job title (See instructions) Partner		Employer (See instructions) Navia	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 250 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/21/2025	5 Full name of contributor Suzanna Brown	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 11215 Saint Judes Dr Dallas, TX 75230			
8 Principal occupation / Job title (See instructions) Self		9 Employer (See instructions) Self	
Date 3/21/2025	Full name of contributor Vikki Buchancn	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 206 Quenta Dr San Antonio, TX 78201			
Principal occupation / Job title (See instructions) GM		Employer (See instructions) ITEAT	
Date 3/21/2025	Full name of contributor Mary-Ann Bjornsti	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 485.00
Contributor address; 16250 Revello Dr Helotes, TX 78023			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/21/2025	Full name of contributor Andrea Aguiar	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 159 Nexus Loop San Jose, CA 95110			
Principal occupation / Job title (See instructions) City employee		Employer (See instructions) City of San Jose	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 251 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/21/2025	5 Full name of contributor Samuel Arciniega	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 5.00
6 Contributor address; 123 S Mesquite St San Antonio, TX 78203			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/21/2025	Full name of contributor Mark Alexander	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 224 W Craig PI San Antonio, TX 78212			
Principal occupation / Job title (See instructions) education		Employer (See instructions) college	
Date 3/21/2025	Full name of contributor Cliff Alburger	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 220 Laurel Ave San Anselmo, CA 94960			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/21/2025	Full name of contributor John Barker	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 275.00
Contributor address; 1118 Cerro Alto Dr San Antonio, TX 78213			
Principal occupation / Job title (See instructions) Admin		Employer (See instructions) GSA	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 252 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/21/2025	5 Full name of contributor Janet P Bartos	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 15.00
6 Contributor address; 75 Chevaux Cir Little Rock, AR 72223			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/21/2025	Full name of contributor Angela Hopkins	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 18414 REDRIVER FAEN San Antonio, TX 78259			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/21/2025	Full name of contributor Angela Hopkins	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 18414 REDRIVER FAEN San Antonio, TX 78259			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/21/2025	Full name of contributor Laura Hamilton	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 707 Randolph Ave SE Huntsville, AL 35801			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 253 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/21/2025	5 Full name of contributor Michael Kloepping	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 746 Senate Ave Evansville, IN 47711			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/21/2025	Full name of contributor Shawn Hunt	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 8707 Shady Mtn San Antonio, TX 78254			City; State; Zip Code
Principal occupation / Job title (See instructions) Nurse		Employer (See instructions) Baptist	
Date 3/21/2025	Full name of contributor Gary Jones	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 1223 Viewridge Dr San Antonio, TX 78213			City; State; Zip Code
Principal occupation / Job title (See instructions) Event planner		Employer (See instructions) Self	
Date 3/21/2025	Full name of contributor Anne Johnson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 846 Binbrook Dr Mesquite, TX 75149			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 254 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/21/2025	5 Full name of contributor Joan Duckworte	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 20.00
6 Contributor address; 907 Riva Rd San Antonio, TX 78210			City; State; Zip Code
8 Principal occupation / Job title (See instructions) corporation		9 Employer (See instructions) Bonham Exchange	
Date 3/21/2025	Full name of contributor Agnes Fernandez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 219 9th Ave Unit 811 Oakland, CA 94606			City; State; Zip Code
Principal occupation / Job title (See instructions) Registered Nurse		Employer (See instructions) UCSF	
Date 3/21/2025	Full name of contributor Jared Godes	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1.00
Contributor address; 1835 N Kenmore Ave Apt 12 Los Angeles, CA 90027			City; State; Zip Code
Principal occupation / Job title (See instructions) Fundraiser		Employer (See instructions) JG Impact LLC	
Date 3/21/2025	Full name of contributor Eva Galvan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 4918 E Beverly Mae Dr San Antonio, TX 78229			City; State; Zip Code
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) UT Health San Antonio	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 255 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/21/2025	5 Full name of contributor Joseph Pugliese	<input type="checkbox"/> out-of-state PAC (ID# _____)	7 Amount of contribution (\$) 80.00
6 Contributor address; 5931 Sunance Ln San Antonio, TX 78238			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) N/A	
Date 3/21/2025	Full name of contributor Mark Pulido	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 100.00
Contributor address; 16617 Amberwood Way Cerritos, CA 90703			City; State; Zip Code
Principal occupation / Job title (See instructions) Mayor (Ret.)		Employer (See instructions) City of Cerritos	
Date 3/21/2025	Full name of contributor Timothy Rabroker	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 2.00
Contributor address; 893 Shaw Ln Killeen, TX 76542			City; State; Zip Code
Principal occupation / Job title (See instructions) Firefighter		Employer (See instructions) City of Killeen	
Date 3/21/2025	Full name of contributor Ilene Rapkin	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 25.00
Contributor address; 473 W End Ave New York, NY 10024			City; State; Zip Code
Principal occupation / Job title (See instructions) Management consultant		Employer (See instructions) Self	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 256 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/21/2025	5 Full name of contributor Ricardo Rodriguez	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 20.00
6 Contributor address; 3022 Markham Woods San Antonio, TX 78247			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Director of Asset Management		9 Employer (See instructions) San Antonio Alternative Housing Corporation	
Date 3/21/2025	Full name of contributor Joshua Reyna	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 538 Southtrail Dr San Antonio, TX 78216			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/21/2025	Full name of contributor Ladd Reynolds	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 16023 Manor Square Dr Houston, TX 77062			City; State; Zip Code
Principal occupation / Job title (See instructions) Investor		Employer (See instructions) Self	
Date 3/21/2025	Full name of contributor Brandon Smith	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 907 E Sayles Dr Palatine, IL 60074			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 257 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/21/2025	5 Full name of contributor Xavier Sanchez	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 723 Texas Ave San Antonio, TX 78201			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Pharmacy technician		9 Employer (See instructions) University health system	
Date 3/21/2025	Full name of contributor Mark Deniel Sampelo	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 12512 Ark Rd Frisco, TX 75035			City; State; Zip Code
Principal occupation / Job title (See instructions) Financial Advisor		Employer (See instructions) Northwestern Mutual	
Date 3/21/2025	Full name of contributor David Sailer	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 150.00
Contributor address; 223 Valley Rd Montclair, NJ 07042			City; State; Zip Code
Principal occupation / Job title (See instructions) union rep		Employer (See instructions) SEIU	
Date 3/21/2025	Full name of contributor Dylan Smolka	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 1425 E Crockett St San Antonio, TX 78202			City; State; Zip Code
Principal occupation / Job title (See instructions) RN		Employer (See instructions) Keystone Care	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 258 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/21/2025	5 Full name of contributor Cynthia Tenorio	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 5.00
6 Contributor address; 108 Mountain View Cir Clarksville, AR 72830			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/21/2025	Full name of contributor Sherry Wagner	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 506 Elizabeth Rd San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/21/2025	Full name of contributor Kelly Vance	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 3670 Stoney Branch St San Antonio, TX 78247			City; State; Zip Code
Principal occupation / Job title (See instructions) Insurance Agent		Employer (See instructions) TI Hernandez Agency	
Date 3/21/2025	Full name of contributor Susan R Turis	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 4713 Avenue N Brooklyn, NY 11234			City; State; Zip Code
Principal occupation / Job title (See instructions) Yoga		Employer (See instructions) Self	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 259 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/21/2025	5 Full name of contributor Jesse Wells 6 Contributor address; 8823 Dugas Dr Apt 14304 San Antonio, TX 78251	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) Division Leader		9 Employer (See instructions) Chase	
Date 3/21/2025	Full name of contributor Luz Eluz Perez Contributor address; 5327 Vista Run Dr San Antonio, TX 78247	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 40.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A	
Date 3/21/2025	Full name of contributor Alejandro Pena Contributor address; 619 Cupples Rd San Antonio, TX 78237	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) Mertz Sausage Company	
Date 3/21/2025	Full name of contributor David Plotkin Contributor address; 3402 Hunters Run St San Antonio, TX 78230	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 260 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/21/2025	5 Full name of contributor Lisa Ortega	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 6622 Moss Oak Dr San Antonio, TX 78229			
8 Principal occupation / Job title (See instructions) CHW		9 Employer (See instructions) THC	
Date 3/21/2025	Full name of contributor Jean Oppenheimer	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 312 E Hermosa Dr San Antonio, TX 78212			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/21/2025	Full name of contributor Joyce Newstat	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1000.00
Contributor address; 1170 Sacramento St Apt 15D San Francisco, CA 94108			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/21/2025	Full name of contributor Farrah Montoya	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 20.00
Contributor address; 2011 Elysian Fls Austin, TX 78727			
Principal occupation / Job title (See instructions) HR Manager		Employer (See instructions) Apple	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 261 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/21/2025	5 Full name of contributor Howard Levi	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 300 W 108th St Apt 9C New York, NY 10025			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/21/2025	Full name of contributor Taina Litwak	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 13029 Chestnut Oak Dr Gaithersburg, MD 20878			City; State; Zip Code
Principal occupation / Job title (See instructions) scientific illustrator		Employer (See instructions) US Dept. of Agriculture	
Date 3/21/2025	Full name of contributor Bryan Lee Martinez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 333 Clemente Ave Brownsville, TX 78521			City; State; Zip Code
Principal occupation / Job title (See instructions) Marketing		Employer (See instructions) Self	
Date 3/21/2025	Full name of contributor Karen Lee	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; PO Box 152 Ross, CA 94957			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 262 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/21/2025	5 Full name of contributor Noe Mendoza	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 5602 Presidio Pkwy Apt 2112 San Antonio, TX 78249			
8 Principal occupation / Job title (See instructions) PM		9 Employer (See instructions) AMEX	
Date 3/21/2025	Full name of contributor Kent Mcmillan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 1200 Cascade Trl San Marcos, TX 78666			
Principal occupation / Job title (See instructions) Land Surveyor		Employer (See instructions) Self	
Date 3/21/2025	Full name of contributor Andy Mcgarrahan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1.00
Contributor address; 7110 Canongate Dr Dallas, TX 75248			
Principal occupation / Job title (See instructions) Psychologist		Employer (See instructions) Self	
Date 3/21/2025	Full name of contributor Lynda Marin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 2830 Smith Grade Santa Cruz, CA 95060			
Principal occupation / Job title (See instructions) climate justice philanthropy		Employer (See instructions) Citizens Climate Lobby	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 263 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/22/2025	5 Full name of contributor Joanne Marke	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 200.00
6 Contributor address; 1355 Palisade Dr. Reno, NV 89509			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) N/A	
Date 3/22/2025	Full name of contributor Leslie Marks	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 33.33
Contributor address; 1900 Hillman Ave Belmont, CA 94002			City; State; Zip Code
Principal occupation / Job title (See instructions) Music Teacher		Employer (See instructions) Leslie Marks Music Studio	
Date 3/22/2025	Full name of contributor Theresa Lynn McDonald	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 535 Lowell Ave. Palo Alto, CA 94301			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) N/A	
Date 3/22/2025	Full name of contributor Andy Mcgarrahan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1.00
Contributor address; 7110 Canongate Dr Dallas, TX 75248			City; State; Zip Code
Principal occupation / Job title (See instructions) Psychologist		Employer (See instructions) Self	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 264 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/22/2025	5 Full name of contributor Jonathan McIntyre	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 35.00
	6 Contributor address; 8 High Haith Rd Arlington, MA 02476	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Software Engineer		9 Employer (See instructions) Lam Research	
Date 3/22/2025	Full name of contributor Justin Meek	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 12.00
	Contributor address; 2350 Castro St San Francisco, CA 94131	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor Sonia Miles	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
	Contributor address; 802 Fuego Del Sol San Antonio, TX 78260	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor Wesley Madere	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
	Contributor address; 308 Muse Dr Spring Branch, TX 78070	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 265 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/22/2025	5 Full name of contributor Michael OHare	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 200.00
6 Contributor address; 2962 Russell St Berkeley, CA 94705			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor Fred Osgood	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 2570 Hidden Cove Rd Annapolis, MD 21401			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor Angela Pedrigal	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 114 Mahogany Ln Union City, CA 94587			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor Neal Pardee	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 3518 Dahlia Ave Los Angeles, CA 90026			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 266 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/22/2025	5 Full name of contributor Jennifer Palmieri	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 6157 Elmoor Dr Troy, MI 48098			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Project Manager		9 Employer (See instructions) Ally	
Date 3/22/2025	Full name of contributor Susan Weir	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 2 Larchwood Dr Cambridge, MA 02138			City; State; Zip Code
Principal occupation / Job title (See instructions) Scientist		Employer (See instructions) Joslin Diabetes Center	
Date 3/22/2025	Full name of contributor David Underwood	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 11.67
Contributor address; 1226 Brighton Rd Naperville, IL 60563			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor Gabriel Uy	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 3395 Fico Ave Las Vegas, NV 89141			City; State; Zip Code
Principal occupation / Job title (See instructions) Finance Officer		Employer (See instructions) U.S. Army	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 267 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/22/2025	5 Full name of contributor Beyrut Van Het Hof	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 30.00
	6 Contributor address; 3400 E Lafayette St Detroit, MI 48207	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Registered Nurse		9 Employer (See instructions) Trustaff	
Date 3/22/2025	Full name of contributor Timothy Textor	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
	Contributor address; 1800 Bandon Way Sacramento, CA 95833	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor Patricia Strawn	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
	Contributor address; 7722 Cascade Oak Dr San Antonio, TX 78249	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor Sandra Lynne Staebell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 20.00
	Contributor address; 1032 Woodgate Dr Kirkwood, MO 63122	City; State; Zip Code	
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 268 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/22/2025	5 Full name of contributor Shubha Sastry	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 6543 Washington Blvd Arlington, VA 22205			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) U.S. Department of State	
Date 3/22/2025	Full name of contributor Jim Schmidt	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 2006 18th Ave S Nashville, TN 37212			City; State; Zip Code
Principal occupation / Job title (See instructions) President		Employer (See instructions) Schmidt Government Solutions	
Date 3/22/2025	Full name of contributor Cynthia Rankin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 9351 Bianca San Antonio, TX 78254			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor Timothy Rabroker	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 2.00
Contributor address; 893 Shaw Ln Killeen, TX 76542			City; State; Zip Code
Principal occupation / Job title (See instructions) Firefighter		Employer (See instructions) City of Killeen	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 269 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/22/2025	5 Full name of contributor Cheryl Gannon 6 Contributor address; 1507 Noyes Dr Silver Spring, MD 20910	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See instructions) self employed		9 Employer (See instructions) self	
Date 3/22/2025	Full name of contributor Mark Freeland Contributor address; 6737 NW Northridge Ln Bremerton, WA 98312	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.25
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor Lynn Goldberg Contributor address; 10 White Woods Ln Westport, CT 06880	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor Richard Gray Contributor address; 5409 Summer Cir Austin, TX 78741	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 270 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/22/2025	5 Full name of contributor Sophia Dycaico	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 1604 Q St NW Washington, DC 20009			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Legislative Assistant		9 Employer (See instructions) Rep. Bobby Scott	
Date 3/22/2025	Full name of contributor Krystal Kaai	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 1104 Kealaolu Ave Honolulu, HI 96816			City; State; Zip Code
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) Self-employed	
Date 3/22/2025	Full name of contributor Ramiro Guevara	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 400.00
Contributor address; 2902 Lantana Dr Laredo, TX 78045			City; State; Zip Code
Principal occupation / Job title (See instructions) Self Employed		Employer (See instructions) Self Employed	
Date 3/22/2025	Full name of contributor Christine Harada	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 2513 Queensview Ln La Crescenta, CA 91214			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 271 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martha Hitzfelder-Blackwell	6 Contributor address; City; State; Zip Code 9325 Laurel Grv San Antonio, TX 78250	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ben Hastings	Amount of contribution (\$) 10.00	
	Contributor address; City; State; Zip Code 6727 Millrock Pass Live Oak, TX 78233		
Principal occupation / Job title (See instructions) VP of Sales		Employer (See instructions) Green Light Distribution	
Date 3/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lynette Bech	Amount of contribution (\$) 7.00	
	Contributor address; City; State; Zip Code 23588 Highway 430 Franklin, LA 70438		
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lawrence Bailis	Amount of contribution (\$) 50.00	
	Contributor address; City; State; Zip Code 133 Brattle St Cambridge, MA 02138		
Principal occupation / Job title (See instructions) Professor		Employer (See instructions) Brandeis University	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 272 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/22/2025	5 Full name of contributor Norma Ayee	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 703 N Lakeside Dr Lake Worth, FL 33460			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor Rebecca Buckwalter-Poza	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 1447 Chapin St NW Washington, DC 20009			City; State; Zip Code
Principal occupation / Job title (See instructions) Senior fellow		Employer (See instructions) Alliance for Justice	
Date 3/22/2025	Full name of contributor Valerie Booze	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 3.00
Contributor address; 5133 Long Pointe Rd Wilmington, NC 28409			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor Carol Brach	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 2217 Henry St Bellingham, WA 98225			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 273 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/22/2025	5 Full name of contributor Kathy Cronkite	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
	6 Contributor address; PO Box 5261 Austin, TX 78763	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor Mary Crooms	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 8.33
	Contributor address; 323 20th Ave Paterson, NJ 07513	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor Aimee Daigle	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
	Contributor address; 405 Harmon Dr San Antonio, TX 78209	City; State; Zip Code	
Principal occupation / Job title (See instructions) Home Health Caregiver		Employer (See instructions) Self- Employed	
Date 3/22/2025	Full name of contributor Meredith D Curry	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
	Contributor address; 138 Clareview Ave San Jose, CA 95127	City; State; Zip Code	
Principal occupation / Job title (See instructions) Executive		Employer (See instructions) NCCPC	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 274 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/22/2025	5 Full name of contributor Ellen Y	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 1349 Lexington Ave New York, NY 10128			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor Laurie Young	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 470 W End Ave New York, NY 10024			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/22/2025	Full name of contributor Debra Zuniga	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 3122 Bear Springs Dr San Antonio, TX 78245			City; State; Zip Code
Principal occupation / Job title (See instructions) Teacher		Employer (See instructions) Harlandale ISD	
Date 3/22/2025	Full name of contributor Karen Williams	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 12540 Walnut Ct Kansas City, MO 64145			City; State; Zip Code
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 275 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/22/2025	5 Full name of contributor Ling Zhu	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 2615 Dante Ct Austin, TX 78748			
8 Principal occupation / Job title (See instructions) Software engineer		9 Employer (See instructions) Coenterprise	
Date 3/23/2025	Full name of contributor Mariah Zuniga	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 219 Rudolph San Antonio, TX 78202			
Principal occupation / Job title (See instructions) Health and Fitness		Employer (See instructions) Mariah Zuniga	
Date 3/23/2025	Full name of contributor Patricia Dahia	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Contributor address; 13314 Bow Heights Dr San Antonio, TX 78230			
Principal occupation / Job title (See instructions) Faculty		Employer (See instructions) UTHSA	
Date 3/23/2025	Full name of contributor Allan Conrad	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 210 W Gramercy PI San Antonio, TX 78212			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 276 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/23/2025	5 Full name of contributor Tiffani Chambers	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 400.00
6 Contributor address; 21 W 127th St Apt A New York, NY 10027			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Finance		9 Employer (See instructions) Goldman Sachs	
Date 3/23/2025	Full name of contributor Amefil Agbayani	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 3432 Kalihi St Apt B1 Honolulu, HI 96819			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/23/2025	Full name of contributor Faye Baylan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 150.00
Contributor address; 144 Stone Hill Dr San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) RN		Employer (See instructions) Baylan MDPA	
Date 3/23/2025	Full name of contributor Joyce Berkowitz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 159 Carmel Ave El Cerrito, CA 94530			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 277 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/23/2025	5 Full name of contributor Michael Barclay	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 1854 Doris Dr Menlo Park, CA 94025			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired	
Date 3/23/2025	Full name of contributor Emily Blazer	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 6103 Cary Dr Austin, TX 78757			City; State; Zip Code
Principal occupation / Job title (See instructions) retired systems analyst		Employer (See instructions) Teacher Retirement System	
Date 3/23/2025	Full name of contributor Patricia J. Hill	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 54 Crusher Rd Cheshire, MA 01225			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/23/2025	Full name of contributor Steve Hixon	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 750.00
Contributor address; 114 Rio Bravo San Antonio, TX 78232			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 278 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/23/2025	5 Full name of contributor Wendy Ho	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 150.00
6 Contributor address; 5804 Pentz Way San Jose, CA 95123			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Chief of Staff		9 Employer (See instructions) County of Santa Clara	
Date 3/23/2025	Full name of contributor Carolyn Hoffman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 16.67
Contributor address; 5 Rockledge Rd White Plains, NY 10603			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/23/2025	Full name of contributor Katherine Herz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 1516 S St Apt 811 Sacramento, CA 95811			City; State; Zip Code
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) Sutter Medical Group	
Date 3/23/2025	Full name of contributor Sarah Hanuske	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 8.33
Contributor address; 3934 Spenard Rd Apt 3 Anchorage, AK 99517			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 279 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/23/2025	5 Full name of contributor Winnie Hahn 6 Contributor address; 5202 Hampden Ln Bethesda, MD 20814	<input type="checkbox"/> out-of-state PAC (ID# _____)	7 Amount of contribution (\$) 10.00
8 Principal occupation / Job title (See instructions) Physician		9 Employer (See instructions) VA	
Date 3/23/2025	Full name of contributor Linda Hummel Contributor address; PO Box 10 Fall River Mills, CA 96028	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/23/2025	Full name of contributor Jj Dycxico Contributor address; 1143 Plum Ave Sunnyvale, CA 94087	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) Jerome Dycxico	
Date 3/23/2025	Full name of contributor Cassandra Dickson Contributor address; 638 NW Skyline Crest Rd Portland, OR 97229	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 10.00
Principal occupation / Job title (See instructions) Writer		Employer (See instructions) Self	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 280 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/23/2025	5 Full name of contributor Barbara Ginther	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 11.67
6 Contributor address; 9326 Whispering Pines Dr Saline, MI 48176			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/23/2025	Full name of contributor Aimee Schumacher	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 296 Woods Of Boerne Blvd Boerne, TX 78006			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/23/2025	Full name of contributor Katherine Tai	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 3700 Ingomar St NW Washington, DC 20015			City; State; Zip Code
Principal occupation / Job title (See instructions) Agency head		Employer (See instructions) US Government	
Date 3/23/2025	Full name of contributor Lisa Strickland	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 573 Lilac Dr Los Osos, CA 93402			City; State; Zip Code
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) Lisa Breen Strickland	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 281 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/23/2025	5 Full name of contributor Timothy Textor	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 5.00
6 Contributor address; 1800 Bandon Way Sacramento, CA 95833			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/23/2025	Full name of contributor Stephen Teitel	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 133 Monroe Pkwy Rochester, NY 14618			
Principal occupation / Job title (See instructions) prof. of physics		Employer (See instructions) University of Rochester	
Date 3/23/2025	Full name of contributor Charles Spurr	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 139 Broadway St Wakefield, MA 01880			
Principal occupation / Job title (See instructions) Software Engineer retired		Employer (See instructions) retired	
Date 3/23/2025	Full name of contributor Barbara Stowe	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 11507 Woodstock Way Reston, VA 20194			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 282 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/23/2025	5 Full name of contributor Armi Wallace	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 15.00
	6 Contributor address; 5515 Abilene Trl # 20 San Antonio, TX 78222	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Admin Staff		9 Employer (See instructions) A&M San Antonio	
Date 3/23/2025	Full name of contributor Servando Pena	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
	Contributor address; 9427 Braun Pt San Antonio, TX 78254	City; State; Zip Code	
Principal occupation / Job title (See instructions) Retail		Employer (See instructions) WWComics	
Date 3/23/2025	Full name of contributor Marcea Manley	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 1.67
	Contributor address; 18008 Saint Croix Trl N Marine On Saint Croix, MN 55047	City; State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/23/2025	Full name of contributor Greg Linden	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
	Contributor address; 117 Maiden Ln Oakland, CA 94602	City; State; Zip Code	
Principal occupation / Job title (See instructions) Researcher		Employer (See instructions) UC Berkeley	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 283 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/23/2025	5 Full name of contributor Judith Laufer	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 16414 Ledge Park St San Antonio, TX 78232			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/23/2025	Full name of contributor Kathryn McCarthy	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 1962 Keystone Dr El Dorado Hills, CA 95762			City; State; Zip Code
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) Pacific Clinics	
Date 3/24/2025	Full name of contributor George Martinez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 1130 Broadway St Apt 248 San Antonio, TX 78215			City; State; Zip Code
Principal occupation / Job title (See instructions) Senior Digital Fundraising Associate		Employer (See instructions) SBDigital	
Date 3/24/2025	Full name of contributor Dianne Lindig Lovett	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 1580 Hay Hollar Rd Bandera, TX 78003			City; State; Zip Code
Principal occupation / Job title (See instructions) Ranch Owner/ Manager		Employer (See instructions) Self	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 284 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2025	5 Full name of contributor Gina Maria Leonetti	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 15.00
6 Contributor address; 415 E 52nd St Apt 10DA New York, NY 10022			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Freelance Film/TV Producer		9 Employer (See instructions) Self	
Date 3/24/2025	Full name of contributor Henry Levenson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 22061 Brentwood Cir Boca Raton, FL 33433			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/24/2025	Full name of contributor Daniel Lizarraga	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 9005 Misty Wood Ave Laredo, TX 78045			City; State; Zip Code
Principal occupation / Job title (See instructions) Designer		Employer (See instructions) SBDigital	
Date 3/24/2025	Full name of contributor William Petrick	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 3391 Keha Dr Kihei, HI 96753			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 285 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2025	5 Full name of contributor Martin Page	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 1010 SW 2nd Ave Miami, FL 33130			
8 Principal occupation / Job title (See instructions) Partner/COO		9 Employer (See instructions) MDW Communications	
Date 3/24/2025	Full name of contributor Celina Montoya	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 307 Abiso Ave San Antonio, TX 78209			
Principal occupation / Job title (See instructions) director		Employer (See instructions) AXR Strategies	
Date 3/24/2025	Full name of contributor Richard L Nimz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 1314 D St Apt B Floresville, TX 78114			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/24/2025	Full name of contributor William OBrien	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 3.00
Contributor address; 3838 Lockhill Selma Rd Apt 314 San Antonio, TX 78230			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 286 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2025	5 Full name of contributor Luke OConnell	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 315 N 12th St Apt 317 Philadelphia, PA 19107			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Senior Advisor		9 Employer (See instructions) US House	
Date 3/24/2025	Full name of contributor Sara Stephenson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 20.00
Contributor address; 1823 Jefferson Ave Saint Paul, MN 55105			City; State; Zip Code
Principal occupation / Job title (See instructions) Pollster		Employer (See instructions) TargetSmart	
Date 3/24/2025	Full name of contributor John Stettler	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; PO Box 697 Royse City, TX 75189			City; State; Zip Code
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) J & M Plastics Inc	
Date 3/24/2025	Full name of contributor Landon St Gordon	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 860 N Orange Ave Apt 349 Orlando, FL 32801			City; State; Zip Code
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) MDW Communications	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 287 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2025	5 Full name of contributor Georgia Thompson	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 484 S 300 E Cedar City, UT 84720			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/24/2025	Full name of contributor Jaclyn Tacoronte	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 150.00
Contributor address; 38 Fillmore St Staten Island, NY 10301			City; State; Zip Code
Principal occupation / Job title (See instructions) Local 3		Employer (See instructions) Electrician	
Date 3/24/2025	Full name of contributor Love T Duka	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 7039 San Pedro Ave Apt 508 San Antonio, TX 78216			City; State; Zip Code
Principal occupation / Job title (See instructions) Caregiver		Employer (See instructions) Love Duka	
Date 3/24/2025	Full name of contributor Patricia Shiffer	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 5.00
Contributor address; 6525 Coyote Call Trl Sparks, NV 89436			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 288 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2025	5 Full name of contributor Robert Schor	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 180.00
6 Contributor address; 2824 Jutland Rd Kensington, MD 20895			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Contractor		9 Employer (See instructions) Kelly	
Date 3/24/2025	Full name of contributor Phyllis Sauer	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 365 County Road 425 Eldorado, TX 76936			City; State; Zip Code
Principal occupation / Job title (See instructions) insurance agent		Employer (See instructions) self	
Date 3/24/2025	Full name of contributor Graciela Sanchez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 233 Lotus St San Antonio, TX 78210			City; State; Zip Code
Principal occupation / Job title (See instructions) Director		Employer (See instructions) Esperanza	
Date 3/24/2025	Full name of contributor Carla Salinas	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 321 Kampmann Ave San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 289 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2025	5 Full name of contributor Timothy Rabroker	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 2.00
6 Contributor address; 893 Shaw Ln Killeen, TX 76542			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Firefighter		9 Employer (See instructions) City of Killeen	
Date 3/24/2025	Full name of contributor Curtis Proud	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 4716 Laura Ln Saint Paul, MN 55126			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/24/2025	Full name of contributor Melissa Guerra	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 122 Alamosa Ave San Antonio, TX 78210			City; State; Zip Code
Principal occupation / Job title (See instructions) CRO		Employer (See instructions) eSkillz	
Date 3/24/2025	Full name of contributor Pam Deitchle	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 8812 Edwardson Ln Austin, TX 78749			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) BDO USA	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 290 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2025	5 Full name of contributor Susan Douglas	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
6 Contributor address; 805 Independence Creek Ln Georgetown, TX 78633			
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/24/2025	Full name of contributor Dennis Dolan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 1470 Taylor Ridge Ct Erie, PA 16505			
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
Date 3/24/2025	Full name of contributor Juliza Espinoza	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 10937 Reliance Creek Dr Austin, TX 78754			
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/24/2025	Full name of contributor Gonzalo Fr Las Heras	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 333 E 57th St New York, NY 10022			
Principal occupation / Job title (See instructions) Not employed		Employer (See instructions) Not employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 291 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2025	5 Full name of contributor Angela Hutsell	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 10.00
6 Contributor address; 2504 W Cover Dr Ozark, MO 65721			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed	
Date 3/24/2025	Full name of contributor Linda Jesse	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 500 W 111th St New York, NY 10025			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/24/2025	Full name of contributor Robert Ineson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 371 Skyline Ridge Dr Willis, TX 77318			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/24/2025	Full name of contributor Suzanne James	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 7.00
Contributor address; 32 Redondo Ct Saint Helena, CA 94574			City; State; Zip Code
Principal occupation / Job title (See instructions) not employed		Employer (See instructions) not employed	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 292 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2025	5 Full name of contributor Joseph Jolly	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 1161 Boylston St Newton, MA 02464			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Attorney / Administrator		9 Employer (See instructions) Wellan	
Date 3/24/2025	Full name of contributor John Klenert	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 70.00
Contributor address; 1741 Johnson Ave NW Apt 101 Washington, DC 20009			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/24/2025	Full name of contributor Amy Kastely	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 233 Lotus St San Antonio, TX 78210			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/24/2025	Full name of contributor Randall Haines	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 16.00
Contributor address; 8810 Scotsman Dr Austin, TX 78750			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 293 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2025	5 Full name of contributor Ashley Hale	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 317 112th Ave NE Apt 1003 Bellevue, WA 98004			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Software Engineer		9 Employer (See instructions) Mozilla Corporation	
Date 3/24/2025	Full name of contributor Robert L Hardison	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 1940 Timber Canyon Rd Santa Paula, CA 93060			City; State; Zip Code
Principal occupation / Job title (See instructions) Farmer		Employer (See instructions) Self	
Date 3/24/2025	Full name of contributor Steven Hays	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 3314 Falling Brk San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/24/2025	Full name of contributor Cindy Bigham	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 1601 15th Pl Plano, TX 75074			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired Teacher		Employer (See instructions) RISD	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 294 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2025	5 Full name of contributor Betsy Berman	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 7.00
6 Contributor address; 1084 Saint Louis PI NE Atlanta, GA 30306			City; State; Zip Code
8 Principal occupation / Job title (See instructions) General Contractor		9 Employer (See instructions) Self	
Date 3/24/2025	Full name of contributor Cathy Bertone	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 407 Pueblo Pintado Helotes, TX 78023			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/24/2025	Full name of contributor Carol Baumstein	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 23 Wall St Arlington, MA 02476			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/24/2025	Full name of contributor Jerry Baker	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 615 E 19th St Houston, TX 77008			City; State; Zip Code
Principal occupation / Job title (See instructions) Auto dealer		Employer (See instructions) Liberty Auto	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 295 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2025	5 Full name of contributor Rishi Adams	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 1781 Spyglass Dr Apt 333 Austin, TX 78746			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Sales		9 Employer (See instructions) Taylor Morrison	
Date 3/24/2025	Full name of contributor Victor Chin	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 18620 Skuse Ct San Jose, CA 95120			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/24/2025	Full name of contributor Hector J Cardenas	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 539 W Elsmere Pl # 78212 San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
Date 3/24/2025	Full name of contributor Jacquelyn Campbell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
Contributor address; 16241 S Lexington Dr Plainfield, IL 60586			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 296 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2025	5 Full name of contributor Michael Conroy	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 15.00
6 Contributor address; 180 Hines Point Rd Vineyard Haven, MA 02568			City; State; Zip Code
8 Principal occupation / Job title (See instructions) System Administrator		9 Employer (See instructions) MVSB	
Date 3/24/2025	Full name of contributor Cori Choate	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 1781 Spyglass Dr Apt 333 Austin, TX 78746			City; State; Zip Code
Principal occupation / Job title (See instructions) Therapist		Employer (See instructions) Heartwood Recovery	
Date 3/24/2025	Full name of contributor Megan Clayton	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 4.50
Contributor address; 906 Fayette St Indianapolis, IN 46202			City; State; Zip Code
Principal occupation / Job title (See instructions) Principal		Employer (See instructions) Upper Canal Consulting	
Date 3/24/2025	Full name of contributor Stanford Clinton Jr	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 20.00
Contributor address; 36 Slippers Ln Cody, WY 82414			City; State; Zip Code
Principal occupation / Job title (See instructions) Rancher		Employer (See instructions) Stanford Clinton Jr	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 297 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2025	5 Full name of contributor Benson Cohen	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 345 W 55th St Apt 7H New York, NY 10019			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Sidley Austin	
Date 3/24/2025	Full name of contributor Molly Cox	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 122 Jeanette Dr San Antonio, TX 78216			City; State; Zip Code
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) Self	
Date 3/24/2025	Full name of contributor Paul Williams	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 11601 Wilshire Blvd Ste 1840 Los Angeles, CA 90025			City; State; Zip Code
Principal occupation / Job title (See instructions) Songwriter/ president & chairman		Employer (See instructions) ASCAP	
Date 3/24/2025	Full name of contributor Steven C Wiggins	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 10.00
Contributor address; 4016 3rd St S # 1131 Jacksonville Beach, FL 32250			City; State; Zip Code
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 298 of 298
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2025	5 Full name of contributor CWA - COPE Political	<input checked="" type="checkbox"/> out-of-state PAC (ID# C00002089)	7 Amount of contribution (\$) 500.00
6 Contributor address; 501 3rd St NW Washington, DC 20001			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# _____)	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)	
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			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A2: 1 of 1</p>
<p>2 FILER NAME Gina O Jones</p>		<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>		<p>\$ 0</p>
<p>5 Date</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)</p> <p>7 Contributor address; City; State; Zip Code</p>	<p>8 Amount of Contribution \$ 9 In-kind contribution description</p> <p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		
<p>Date</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)</p> <p>Contributor address; City; State; Zip Code</p>	<p>Amount of Contribution \$ In-kind contribution description</p> <p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

PLEDGED CONTRIBUTIONS

SCHEDULE B

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule B: 1 of 1</p>
<p>2 FILER NAME Gina O Jones</p>		<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 TOTAL OF UNITEMIZED PLEDGES</p>		<p>\$ 0</p>
<p>5 Date</p>	<p>6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____)</p>	<p>8 Amount of Pledge \$ 9 In-kind contribution description</p>
	<p>7 Pledgor address; City; State; Zip Code</p>	<p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>10 Principal occupation / Job title (See instructions)</p>		<p>11 Employer (See instructions)</p>
<p>Date</p>	<p>Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____)</p>	<p>Amount of Pledge \$ In-kind contribution description</p>
	<p>Pledgor address; City; State; Zip Code</p>	<p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>Principal occupation / Job title (See instructions)</p>		<p>Employer (See instructions)</p>
<p>Date</p>	<p>Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____)</p>	<p>Amount of Pledge \$ In-kind contribution description</p>
	<p>Pledgor address; City; State; Zip Code</p>	<p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>Principal occupation / Job title (See instructions)</p>		<p>Employer (See instructions)</p>
<p>Date</p>	<p>Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____)</p>	<p>Amount of Pledge \$ In-kind contribution description</p>
	<p>Pledgor address; City; State; Zip Code</p>	<p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>Principal occupation / Job title (See instructions)</p>		<p>Employer (See instructions)</p>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.			1 Total pages Schedule E: 1 of 1
2 FILER NAME Gina O Jones			3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS			\$ 0
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)		9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code		10 Interest rate
			11 Maturity date
12 Principal occupation / Job title (See instructions)		13 Employer (See instructions)	
14 Description of Collateral <input type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See instructions)	
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code		19 Amount Guaranteed (\$)
20 Principal occupation (See instructions)		21 Employer (See instructions)	
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)	Loan Amount (\$)	
Is lender a financial institution?	Lender address; City; State; Zip Code	Interest rate	
		Maturity date	
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)	
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code		Amount Guaranteed (\$)
Principal occupation (See instructions)		Employer (See instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender is out-of-state PAC, please see instruction guide for additional reporting requirements			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 1 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)	
4 Date 1/3/2025	5 Payee name NGP/VAN		
6 Amount (\$) 1067.61	7 Payee address; 655 15th St. NW Ste 650 Washington, DC 20005	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Mobilize Platform	
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 1/10/2025	Payee name Texas Democratic Party		
Amount (\$) 1680.00	Payee address; PO Box 25707 Austin, TX 78761	City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description Access to database	
	<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
Date 1/17/2025	Payee name Jordan Abelson		
Amount (\$) 6000.00	Payee address; 316 Sandy Knoll Dr. DoylesTown, PA 18901	City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff	
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 1/17/2025	5 Payee name Joshua Rodriguez															
6 Amount (\$) 6000.00	7 Payee address; 768 Villa Seca El Paso, TX 79928	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 1/17/2025</td> <td>Payee name Faye Marie Suficiencia</td> </tr> <tr> <td>Amount (\$) 500.00</td> <td>Payee address; 11847 Claudette St. San Antonio, TX 78252</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Campaign Staff</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 1/17/2025	Payee name Faye Marie Suficiencia	Amount (\$) 500.00	Payee address; 11847 Claudette St. San Antonio, TX 78252	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff	<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
Date 1/17/2025	Payee name Faye Marie Suficiencia															
Amount (\$) 500.00	Payee address; 11847 Claudette St. San Antonio, TX 78252															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff														
	<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													
<table border="1"> <tr> <td>Date 1/21/2025</td> <td>Payee name MAS Strategy</td> </tr> <tr> <td>Amount (\$) 7000.00</td> <td>Payee address; 3700 Cole Ave. #231 Dallas, TX 75204</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense</td> <td>Description Fundraising Consulting</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 1/21/2025	Payee name MAS Strategy	Amount (\$) 7000.00	Payee address; 3700 Cole Ave. #231 Dallas, TX 75204	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description Fundraising Consulting	<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
Date 1/21/2025	Payee name MAS Strategy															
Amount (\$) 7000.00	Payee address; 3700 Cole Ave. #231 Dallas, TX 75204															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description Fundraising Consulting														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 3 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 1/22/2025	5 Payee name JVC Media															
6 Amount (\$) 5412.50	7 Payee address; City; State; Zip Code 6856 Alamo Downs Pkwy San Antonio, TX 78238															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Yard Signs														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 1/22/2025</td> <td>Payee name Bertia Condra Sciaraffa Ltd. Partnership</td> </tr> <tr> <td>Amount (\$) 7250.00</td> <td>Payee address; City; State; Zip Code 7731 Broadway ST STE A11 San Antonio, TX 78209</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Other: Rent & Lease</td> <td>Description Campaign Office Rent</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 1/22/2025	Payee name Bertia Condra Sciaraffa Ltd. Partnership	Amount (\$) 7250.00	Payee address; City; State; Zip Code 7731 Broadway ST STE A11 San Antonio, TX 78209	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Rent & Lease	Description Campaign Office Rent	<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
Date 1/22/2025	Payee name Bertia Condra Sciaraffa Ltd. Partnership															
Amount (\$) 7250.00	Payee address; City; State; Zip Code 7731 Broadway ST STE A11 San Antonio, TX 78209															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Rent & Lease	Description Campaign Office Rent														
	<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													
<table border="1"> <tr> <td>Date 1/22/2025</td> <td>Payee name SB Digital Inc</td> </tr> <tr> <td>Amount (\$) 8600.00</td> <td>Payee address; City; State; Zip Code 2010 Massachusetts Ave NW Second Floor Washington, DC 20036</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Advertising Expense</td> <td>Description Email Fundraising</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 1/22/2025	Payee name SB Digital Inc	Amount (\$) 8600.00	Payee address; City; State; Zip Code 2010 Massachusetts Ave NW Second Floor Washington, DC 20036	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Email Fundraising	<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
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	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 4 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 1/22/2025	5 Payee name SB Digital Inc															
6 Amount (\$) 3500.00	7 Payee address; City; State; Zip Code 2010 Massachusetts Ave NW Second Floor Washington, DC 20036															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Email Fundraising														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 1/24/2025</td> <td>Payee name Sonya McGrady</td> </tr> <tr> <td>Amount (\$) 1500.00</td> <td>Payee address; City; State; Zip Code PO Box 1293 Evans, GA 30809</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Accounting/Banking</td> <td>Description Campaign finance reporting services</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 1/24/2025	Payee name Sonya McGrady	Amount (\$) 1500.00	Payee address; City; State; Zip Code PO Box 1293 Evans, GA 30809	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Campaign finance reporting services	<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
Date 1/24/2025	Payee name Sonya McGrady															
Amount (\$) 1500.00	Payee address; City; State; Zip Code PO Box 1293 Evans, GA 30809															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Campaign finance reporting services														
	<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													
<table border="1"> <tr> <td>Date 1/27/2025</td> <td>Payee name The Pivot Group Inc</td> </tr> <tr> <td>Amount (\$) 751.00</td> <td>Payee address; City; State; Zip Code 712 H St. NE Unit #606 Washington, DC 20002</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Advertising Expense</td> <td>Description Walk Lit production and shipping</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 1/27/2025	Payee name The Pivot Group Inc	Amount (\$) 751.00	Payee address; City; State; Zip Code 712 H St. NE Unit #606 Washington, DC 20002	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Walk Lit production and shipping	<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
Date 1/27/2025	Payee name The Pivot Group Inc															
Amount (\$) 751.00	Payee address; City; State; Zip Code 712 H St. NE Unit #606 Washington, DC 20002															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Walk Lit production and shipping														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 5 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 1/27/2025	5 Payee name JVC Media															
6 Amount (\$) 2146.60	7 Payee address; City; State; Zip Code 6856 Alamo Downs Pkwy San Antonio, TX 78238															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Yard Signs														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 1/28/2025</td> <td>Payee name Amalgamated Bank</td> </tr> <tr> <td>Amount (\$) 62.21</td> <td>Payee address; City; State; Zip Code 275 Seventh Ave. New York, NY 10001</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Fees</td> <td>Description Bank Fees</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 1/28/2025	Payee name Amalgamated Bank	Amount (\$) 62.21	Payee address; City; State; Zip Code 275 Seventh Ave. New York, NY 10001	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Bank Fees	<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
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Amount (\$) 62.21	Payee address; City; State; Zip Code 275 Seventh Ave. New York, NY 10001															
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	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense															
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<table border="1"> <tr> <td>Date 1/31/2025</td> <td>Payee name Flagship Campaigns LLC</td> </tr> <tr> <td>Amount (\$) 2000.00</td> <td>Payee address; City; State; Zip Code 7926 Broadway St. #707 San Antonio, TX 78209</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Consulting Expense</td> <td>Description Outreach Consulting</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 1/31/2025	Payee name Flagship Campaigns LLC	Amount (\$) 2000.00	Payee address; City; State; Zip Code 7926 Broadway St. #707 San Antonio, TX 78209	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description Outreach Consulting	<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
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 6 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)	
4 Date 1/31/2025	5 Payee name SB Digital Inc		
6 Amount (\$) 18250.00	7 Payee address; City; State; Zip Code 2010 Massachusetts Ave NW Second Floor Washington, DC 20036		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Email Fundraising	
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 1/31/2025	Payee name Jordan Abelson		
Amount (\$) 3000.00	Payee address; City; State; Zip Code 316 Sandy Knoll Dr. Doylestown, PA 18901		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff	
	<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
Date 1/31/2025	Payee name Daniel Arciniega		
Amount (\$) 2500.00	Payee address; City; State; Zip Code 123 South Mesquite St. San Antonio, TX 78203		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff	
	<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
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 7 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 1/31/2025	5 Payee name Beth Hudson															
6 Amount (\$) 1737.79	7 Payee address; City; State; Zip Code 111 Forrest Trail Universal City, TX 78148															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description Campaign finance reporting services														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 1/31/2025</td> <td>Payee name Faye Marie Suficiencia</td> </tr> <tr> <td>Amount (\$) 500.00</td> <td>Payee address; City; State; Zip Code 11847 Claudette St. San Antonio, TX 78252</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Campaign Staff</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 1/31/2025	Payee name Faye Marie Suficiencia	Amount (\$) 500.00	Payee address; City; State; Zip Code 11847 Claudette St. San Antonio, TX 78252	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff	<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
Date 1/31/2025	Payee name Faye Marie Suficiencia															
Amount (\$) 500.00	Payee address; City; State; Zip Code 11847 Claudette St. San Antonio, TX 78252															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff														
	<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													
<table border="1"> <tr> <td>Date 1/31/2025</td> <td>Payee name Joshua Rodriguez</td> </tr> <tr> <td>Amount (\$) 3000.00</td> <td>Payee address; City; State; Zip Code 768 Villa Seca El Paso, TX 79928</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 1/31/2025	Payee name Joshua Rodriguez	Amount (\$) 3000.00	Payee address; City; State; Zip Code 768 Villa Seca El Paso, TX 79928	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 1/31/2025	Payee name Joshua Rodriguez															
Amount (\$) 3000.00	Payee address; City; State; Zip Code 768 Villa Seca El Paso, TX 79928															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 8 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/3/2025	5 Payee name SB Digital Inc															
6 Amount (\$) 3300.00	7 Payee address; City; State; Zip Code 2010 Massachusetts Ave NW Second Floor Washington, DC 20036															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Email Fundraising														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/6/2025</td> <td>Payee name SB Digital Inc</td> </tr> <tr> <td>Amount (\$) 750.00</td> <td>Payee address; City; State; Zip Code 2010 Massachusetts Ave NW Second Floor Washington, DC 20036</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Advertising Expense</td> <td>Description Text Messaging Fundraising</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/6/2025	Payee name SB Digital Inc	Amount (\$) 750.00	Payee address; City; State; Zip Code 2010 Massachusetts Ave NW Second Floor Washington, DC 20036	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Text Messaging Fundraising	<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
Date 2/6/2025	Payee name SB Digital Inc															
Amount (\$) 750.00	Payee address; City; State; Zip Code 2010 Massachusetts Ave NW Second Floor Washington, DC 20036															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Text Messaging Fundraising														
	<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													
<table border="1"> <tr> <td>Date 2/6/2025</td> <td>Payee name QuickBooks/Intuit</td> </tr> <tr> <td>Amount (\$) 0.38</td> <td>Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense</td> <td>Description Accounting Software</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/6/2025	Payee name QuickBooks/Intuit	Amount (\$) 0.38	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Accounting Software	<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
Date 2/6/2025	Payee name QuickBooks/Intuit															
Amount (\$) 0.38	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Accounting Software														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 9 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)										
4 Date 2/6/2025	5 Payee name The Pivot Group Inc											
6 Amount (\$) 1649.00	7 Payee address; 712 H St. NE Unit #606 Washington, DC 20002	City; State; Zip Code										
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Walk Lit production and shipping										
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held									
<table border="1"> <tr> <td>Date 2/7/2025</td> <td>Payee name MAS Strategy</td> </tr> <tr> <td>Amount (\$) 7931.50</td> <td>Payee address; 3700 Cole Ave. #231 Dallas, TX 75204</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense</td> <td>Description Fundraising Consulting</td> </tr> <tr> <td><input type="checkbox"/> Check if travel outside of Texas, complete schedule T</td> <td><input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> </table> <p>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</p>				Date 2/7/2025	Payee name MAS Strategy	Amount (\$) 7931.50	Payee address; 3700 Cole Ave. #231 Dallas, TX 75204	PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description Fundraising Consulting	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Date 2/7/2025	Payee name MAS Strategy											
Amount (\$) 7931.50	Payee address; 3700 Cole Ave. #231 Dallas, TX 75204											
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description Fundraising Consulting										
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense										
<table border="1"> <tr> <td>Date 2/11/2025</td> <td>Payee name Spectrum</td> </tr> <tr> <td>Amount (\$) 208.25</td> <td>Payee address; 400 Washington Blvd. Stamford, CT 06902</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense</td> <td>Description Campaign office internet services</td> </tr> <tr> <td><input type="checkbox"/> Check if travel outside of Texas, complete schedule T</td> <td><input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> </table> <p>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</p>				Date 2/11/2025	Payee name Spectrum	Amount (\$) 208.25	Payee address; 400 Washington Blvd. Stamford, CT 06902	PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Campaign office internet services	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Date 2/11/2025	Payee name Spectrum											
Amount (\$) 208.25	Payee address; 400 Washington Blvd. Stamford, CT 06902											
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Campaign office internet services										
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense										
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED												

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 10 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)										
4 Date 2/12/2025	5 Payee name Sonya McGrady											
6 Amount (\$) 1500.00	7 Payee address; PO Box 1293 Evans, GA 30809	City; State; Zip Code										
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description Campaign finance reporting services										
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held									
<table border="1"> <tr> <td>Date 2/14/2025</td> <td>Payee name Justice Micka</td> </tr> <tr> <td>Amount (\$) 90.00</td> <td>Payee address; 3528 Block Cloud New Braunfels, TX 78130</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> </table>				Date 2/14/2025	Payee name Justice Micka	Amount (\$) 90.00	Payee address; 3528 Block Cloud New Braunfels, TX 78130	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 2/14/2025	Payee name Justice Micka											
Amount (\$) 90.00	Payee address; 3528 Block Cloud New Braunfels, TX 78130											
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing										
	<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									
<table border="1"> <tr> <td>Date 2/14/2025</td> <td>Payee name Karelli Guevara</td> </tr> <tr> <td>Amount (\$) 1400.00</td> <td>Payee address; 3317 Hagen Loop Laredo, TX 78045</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Campaign Staff</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> </table>				Date 2/14/2025	Payee name Karelli Guevara	Amount (\$) 1400.00	Payee address; 3317 Hagen Loop Laredo, TX 78045	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 2/14/2025	Payee name Karelli Guevara											
Amount (\$) 1400.00	Payee address; 3317 Hagen Loop Laredo, TX 78045											
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff										
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 11 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/14/2025	5 Payee name Amanda Price															
6 Amount (\$) 200.00	7 Payee address; City; State; Zip Code 135 Villa Dr. #12D Universal City, TX 78148															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/14/2025</td> <td>Payee name Faye Marie Suficiencia</td> </tr> <tr> <td>Amount (\$) 500.00</td> <td>Payee address; City; State; Zip Code 11847 Claudette St. San Antonio, TX 78252</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Campaign Staff</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/14/2025	Payee name Faye Marie Suficiencia	Amount (\$) 500.00	Payee address; City; State; Zip Code 11847 Claudette St. San Antonio, TX 78252	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff	<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
Date 2/14/2025	Payee name Faye Marie Suficiencia															
Amount (\$) 500.00	Payee address; City; State; Zip Code 11847 Claudette St. San Antonio, TX 78252															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff														
	<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													
<table border="1"> <tr> <td>Date 2/14/2025</td> <td>Payee name Crystal Valladolid</td> </tr> <tr> <td>Amount (\$) 200.00</td> <td>Payee address; City; State; Zip Code 322 Clifford Ct. San Antonio, TX 78210</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/14/2025	Payee name Crystal Valladolid	Amount (\$) 200.00	Payee address; City; State; Zip Code 322 Clifford Ct. San Antonio, TX 78210	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/14/2025	Payee name Crystal Valladolid															
Amount (\$) 200.00	Payee address; City; State; Zip Code 322 Clifford Ct. San Antonio, TX 78210															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 12 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/14/2025	5 Payee name Inez Garcia															
6 Amount (\$) 200.00	7 Payee address; 1666 SW 19th San Antonio, TX 78207	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/14/2025</td> <td>Payee name Tina Acosta</td> </tr> <tr> <td>Amount (\$) 200.00</td> <td>Payee address; City; State; Zip Code 3435 E. Southcross Blvd. #11103 San Antonio, TX 78223</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/14/2025	Payee name Tina Acosta	Amount (\$) 200.00	Payee address; City; State; Zip Code 3435 E. Southcross Blvd. #11103 San Antonio, TX 78223	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/14/2025	Payee name Tina Acosta															
Amount (\$) 200.00	Payee address; City; State; Zip Code 3435 E. Southcross Blvd. #11103 San Antonio, TX 78223															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 2/14/2025</td> <td>Payee name NGP/VAN</td> </tr> <tr> <td>Amount (\$) 1216.85</td> <td>Payee address; City; State; Zip Code 655 15th St. NW Ste 650 Washington, DC 20005</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense</td> <td>Description Mobilize Platform</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/14/2025	Payee name NGP/VAN	Amount (\$) 1216.85	Payee address; City; State; Zip Code 655 15th St. NW Ste 650 Washington, DC 20005	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Mobilize Platform	<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
Date 2/14/2025	Payee name NGP/VAN															
Amount (\$) 1216.85	Payee address; City; State; Zip Code 655 15th St. NW Ste 650 Washington, DC 20005															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Mobilize Platform														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 13 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/14/2025	5 Payee name Flagship Campaigns LLC															
6 Amount (\$) 2000.00	7 Payee address; City; State; Zip Code 7926 Broadway St. #707 San Antonio, TX 78209															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Outreach Consulting														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/18/2025</td> <td>Payee name JVC Media</td> </tr> <tr> <td>Amount (\$) 23490.25</td> <td>Payee address; City; State; Zip Code 6856 Alamo Downs Pkwy San Antonio, TX 78238</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Advertising Expense</td> <td>Description Signs and installation services</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/18/2025	Payee name JVC Media	Amount (\$) 23490.25	Payee address; City; State; Zip Code 6856 Alamo Downs Pkwy San Antonio, TX 78238	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Signs and installation services	<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
Date 2/18/2025	Payee name JVC Media															
Amount (\$) 23490.25	Payee address; City; State; Zip Code 6856 Alamo Downs Pkwy San Antonio, TX 78238															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Signs and installation services														
	<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													
<table border="1"> <tr> <td>Date 2/18/2025</td> <td>Payee name Jordan Abelson</td> </tr> <tr> <td>Amount (\$) 3000.00</td> <td>Payee address; City; State; Zip Code 316 Sandy Knoll Dr. Doylestown, PA 18901</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Campaign Staff</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/18/2025	Payee name Jordan Abelson	Amount (\$) 3000.00	Payee address; City; State; Zip Code 316 Sandy Knoll Dr. Doylestown, PA 18901	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff	<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
Date 2/18/2025	Payee name Jordan Abelson															
Amount (\$) 3000.00	Payee address; City; State; Zip Code 316 Sandy Knoll Dr. Doylestown, PA 18901															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff														
	<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													
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 14 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/18/2025	5 Payee name QuickBooks/Intuit															
6 Amount (\$) 73.87	7 Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Accounting Software														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/18/2025</td> <td>Payee name Barbara Acosta</td> </tr> <tr> <td>Amount (\$) 504.00</td> <td>Payee address; City; State; Zip Code 9414 Graze Branch San Antonio, TX 78211</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/18/2025	Payee name Barbara Acosta	Amount (\$) 504.00	Payee address; City; State; Zip Code 9414 Graze Branch San Antonio, TX 78211	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/18/2025	Payee name Barbara Acosta															
Amount (\$) 504.00	Payee address; City; State; Zip Code 9414 Graze Branch San Antonio, TX 78211															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 2/18/2025</td> <td>Payee name Tina Acosta</td> </tr> <tr> <td>Amount (\$) 468.00</td> <td>Payee address; City; State; Zip Code 3435 E. Southcross Blvd. #11103 San Antonio, TX 78223</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/18/2025	Payee name Tina Acosta	Amount (\$) 468.00	Payee address; City; State; Zip Code 3435 E. Southcross Blvd. #11103 San Antonio, TX 78223	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/18/2025	Payee name Tina Acosta															
Amount (\$) 468.00	Payee address; City; State; Zip Code 3435 E. Southcross Blvd. #11103 San Antonio, TX 78223															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 15 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/18/2025	5 Payee name Daniel Arciniega															
6 Amount (\$) 2500.00	7 Payee address; City; State; Zip Code 123 South Mesquite St. San Antonio, TX 78203															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Campaign Staff														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/18/2025</td> <td>Payee name Azucena Gaitan</td> </tr> <tr> <td>Amount (\$) 504.00</td> <td>Payee address; City; State; Zip Code 1211 Patton Blvd. San Antonio, TX 78237</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/18/2025	Payee name Azucena Gaitan	Amount (\$) 504.00	Payee address; City; State; Zip Code 1211 Patton Blvd. San Antonio, TX 78237	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/18/2025	Payee name Azucena Gaitan															
Amount (\$) 504.00	Payee address; City; State; Zip Code 1211 Patton Blvd. San Antonio, TX 78237															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 2/18/2025</td> <td>Payee name Anamarie Garcia</td> </tr> <tr> <td>Amount (\$) 594.00</td> <td>Payee address; City; State; Zip Code 1418 Melissa Sue San Antonio, TX 78228</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/18/2025	Payee name Anamarie Garcia	Amount (\$) 594.00	Payee address; City; State; Zip Code 1418 Melissa Sue San Antonio, TX 78228	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/18/2025	Payee name Anamarie Garcia															
Amount (\$) 594.00	Payee address; City; State; Zip Code 1418 Melissa Sue San Antonio, TX 78228															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 16 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)
4 Date 2/18/2025	5 Payee name Esperanza Garcia	
6 Amount (\$) 594.00	7 Payee address; City; State; Zip Code 1418 Melissa Sue San Antonio, TX 78228	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held
Date 2/18/2025	Payee name Inez Garcia	
Amount (\$) 594.00	Payee address; City; State; Zip Code 1666 SW 19th San Antonio, TX 78207	
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing
	<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
Date 2/18/2025	Payee name Isabell Garcia	
Amount (\$) 504.00	Payee address; City; State; Zip Code 7611 Buckboard Ln. San Antonio, TX 78227	
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing
	<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
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 17 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/18/2025	5 Payee name Jasmine Garcia															
6 Amount (\$) 252.00	7 Payee address; 6515 Whisper Pond San Antonio, TX 78252	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/18/2025</td> <td>Payee name Stephanie Garcia</td> </tr> <tr> <td>Amount (\$) 504.00</td> <td>Payee address; 3207 Mission River San Antonio, TX 78245</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/18/2025	Payee name Stephanie Garcia	Amount (\$) 504.00	Payee address; 3207 Mission River San Antonio, TX 78245	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/18/2025	Payee name Stephanie Garcia															
Amount (\$) 504.00	Payee address; 3207 Mission River San Antonio, TX 78245															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 2/18/2025</td> <td>Payee name Michelle Garcia-Ochoa</td> </tr> <tr> <td>Amount (\$) 504.00</td> <td>Payee address; 114 Tipperary Ave. San Antonio, TX 78223</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/18/2025	Payee name Michelle Garcia-Ochoa	Amount (\$) 504.00	Payee address; 114 Tipperary Ave. San Antonio, TX 78223	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
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Amount (\$) 504.00	Payee address; 114 Tipperary Ave. San Antonio, TX 78223															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 18 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/18/2025	5 Payee name Crystal Valladolid															
6 Amount (\$) 594.00	7 Payee address; City; State; Zip Code 322 Clifford Ct. San Antonio, TX 78210															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/18/2025</td> <td>Payee name Joshua Rodriguez</td> </tr> <tr> <td>Amount (\$) 3000.00</td> <td>Payee address; City; State; Zip Code 768 Villa Seca El Paso, TX 79928</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/18/2025	Payee name Joshua Rodriguez	Amount (\$) 3000.00	Payee address; City; State; Zip Code 768 Villa Seca El Paso, TX 79928	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/18/2025	Payee name Joshua Rodriguez															
Amount (\$) 3000.00	Payee address; City; State; Zip Code 768 Villa Seca El Paso, TX 79928															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 2/18/2025</td> <td>Payee name Amanda Price</td> </tr> <tr> <td>Amount (\$) 414.00</td> <td>Payee address; City; State; Zip Code 135 Villa Dr. #12D Universal City, TX 78148</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/18/2025	Payee name Amanda Price	Amount (\$) 414.00	Payee address; City; State; Zip Code 135 Villa Dr. #12D Universal City, TX 78148	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/18/2025	Payee name Amanda Price															
Amount (\$) 414.00	Payee address; City; State; Zip Code 135 Villa Dr. #12D Universal City, TX 78148															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 19 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/18/2025	5 Payee name Albert Mora															
6 Amount (\$) 594.00	7 Payee address; City; State; Zip Code 1418 Melissa Sue San Antonio, TX 78228															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/18/2025</td> <td>Payee name Beth Hudson</td> </tr> <tr> <td>Amount (\$) 800.00</td> <td>Payee address; City; State; Zip Code 111 Forrest Trail Universal City, TX 78148</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Accounting/Banking</td> <td>Description Campaign finance reporting services</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/18/2025	Payee name Beth Hudson	Amount (\$) 800.00	Payee address; City; State; Zip Code 111 Forrest Trail Universal City, TX 78148	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Campaign finance reporting services	<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
Date 2/18/2025	Payee name Beth Hudson															
Amount (\$) 800.00	Payee address; City; State; Zip Code 111 Forrest Trail Universal City, TX 78148															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Campaign finance reporting services														
	<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													
<table border="1"> <tr> <td>Date 2/18/2025</td> <td>Payee name Isaac Ybarra</td> </tr> <tr> <td>Amount (\$) 594.00</td> <td>Payee address; City; State; Zip Code 1666 SW 19th St. San Antonio, TX 78207</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/18/2025	Payee name Isaac Ybarra	Amount (\$) 594.00	Payee address; City; State; Zip Code 1666 SW 19th St. San Antonio, TX 78207	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/18/2025	Payee name Isaac Ybarra															
Amount (\$) 594.00	Payee address; City; State; Zip Code 1666 SW 19th St. San Antonio, TX 78207															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 20 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/21/2025	5 Payee name Isaac Ybarra															
6 Amount (\$) 504.00	7 Payee address; 1666 SW 19th St. San Antonio, TX 78207	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/21/2025</td> <td>Payee name Albert Mora</td> </tr> <tr> <td>Amount (\$) 252.00</td> <td>Payee address; 1418 Melissa Sue San Antonio, TX 78228</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/21/2025	Payee name Albert Mora	Amount (\$) 252.00	Payee address; 1418 Melissa Sue San Antonio, TX 78228	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/21/2025	Payee name Albert Mora															
Amount (\$) 252.00	Payee address; 1418 Melissa Sue San Antonio, TX 78228															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 2/21/2025</td> <td>Payee name Amanda Price</td> </tr> <tr> <td>Amount (\$) 250.00</td> <td>Payee address; 135 Villa Dr. #12D Universal City, TX 78148</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/21/2025	Payee name Amanda Price	Amount (\$) 250.00	Payee address; 135 Villa Dr. #12D Universal City, TX 78148	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/21/2025	Payee name Amanda Price															
Amount (\$) 250.00	Payee address; 135 Villa Dr. #12D Universal City, TX 78148															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 21 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)
4 Date 2/21/2025	5 Payee name Andrew Reynosa	
6 Amount (\$) 216.00	7 Payee address; City; State; Zip Code 1019 W. Woodlawn San Antonio, TX 78201	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held
Date 2/21/2025	Payee name Crystal Valladolid	
Amount (\$) 304.00	Payee address; City; State; Zip Code 322 Clifford Ct. San Antonio, TX 78210	
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing
	<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
Date 2/21/2025	Payee name Michelle Garcia-Ochoa	
Amount (\$) 504.00	Payee address; City; State; Zip Code 114 Tipperary Ave. San Antonio, TX 78223	
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 22 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/21/2025	5 Payee name Stephanie Garcia															
6 Amount (\$) 504.00	7 Payee address; City; State; Zip Code 3207 Mission River San Antonio, TX 78245															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/21/2025</td> <td>Payee name Anamarie Garcia</td> </tr> <tr> <td>Amount (\$) 378.00</td> <td>Payee address; City; State; Zip Code 1418 Melissa Sue San Antonio, TX 78228</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/21/2025	Payee name Anamarie Garcia	Amount (\$) 378.00	Payee address; City; State; Zip Code 1418 Melissa Sue San Antonio, TX 78228	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/21/2025	Payee name Anamarie Garcia															
Amount (\$) 378.00	Payee address; City; State; Zip Code 1418 Melissa Sue San Antonio, TX 78228															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 2/21/2025</td> <td>Payee name Jasmine Garcia</td> </tr> <tr> <td>Amount (\$) 252.00</td> <td>Payee address; City; State; Zip Code 6515 Whisper Pond San Antonio, TX 78252</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/21/2025	Payee name Jasmine Garcia	Amount (\$) 252.00	Payee address; City; State; Zip Code 6515 Whisper Pond San Antonio, TX 78252	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/21/2025	Payee name Jasmine Garcia															
Amount (\$) 252.00	Payee address; City; State; Zip Code 6515 Whisper Pond San Antonio, TX 78252															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 23 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/21/2025	5 Payee name Isabell Garcia															
6 Amount (\$) 504.00	7 Payee address; 7611 Buckboard Ln. San Antonio, TX 78227	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/21/2025</td> <td>Payee name Esperanza Garcia</td> </tr> <tr> <td>Amount (\$) 504.00</td> <td>Payee address; 1418 Melissa Sue San Antonio, TX 78228</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/21/2025	Payee name Esperanza Garcia	Amount (\$) 504.00	Payee address; 1418 Melissa Sue San Antonio, TX 78228	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/21/2025	Payee name Esperanza Garcia															
Amount (\$) 504.00	Payee address; 1418 Melissa Sue San Antonio, TX 78228															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 2/21/2025</td> <td>Payee name Inez Garcia</td> </tr> <tr> <td>Amount (\$) 304.00</td> <td>Payee address; 1666 SW 19th San Antonio, TX 78207</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/21/2025	Payee name Inez Garcia	Amount (\$) 304.00	Payee address; 1666 SW 19th San Antonio, TX 78207	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/21/2025	Payee name Inez Garcia															
Amount (\$) 304.00	Payee address; 1666 SW 19th San Antonio, TX 78207															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 24 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/21/2025	5 Payee name Adan Fernandez-Gonzalez															
6 Amount (\$) 342.00	7 Payee address; 1503 June Berry San Antonio, TX 78260	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/21/2025</td> <td>Payee name Azucena Gaitan</td> </tr> <tr> <td>Amount (\$) 504.00</td> <td>Payee address; 1211 Patton Blvd. San Antonio, TX 78237</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/21/2025	Payee name Azucena Gaitan	Amount (\$) 504.00	Payee address; 1211 Patton Blvd. San Antonio, TX 78237	PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/21/2025	Payee name Azucena Gaitan															
Amount (\$) 504.00	Payee address; 1211 Patton Blvd. San Antonio, TX 78237															
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 2/21/2025</td> <td>Payee name Tina Acosta</td> </tr> <tr> <td>Amount (\$) 304.00</td> <td>Payee address; 3435 E. Southcross Blvd. #11103 San Antonio, TX 78223</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/21/2025	Payee name Tina Acosta	Amount (\$) 304.00	Payee address; 3435 E. Southcross Blvd. #11103 San Antonio, TX 78223	PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/21/2025	Payee name Tina Acosta															
Amount (\$) 304.00	Payee address; 3435 E. Southcross Blvd. #11103 San Antonio, TX 78223															
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 25 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)										
4 Date 2/21/2025	5 Payee name Barbara Acosta											
6 Amount (\$) 504.00	7 Payee address; City; State; Zip Code 9414 Graze Branch San Antonio, TX 78211											
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing										
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held									
<table border="1"> <tr> <td>Date 2/22/2025</td> <td>Payee name Lyft</td> </tr> <tr> <td>Amount (\$) 72.19</td> <td>Payee address; City; State; Zip Code 185 Berry St Ste 400 San Francisco, CA 94107</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Travel Out Of District</td> <td>Description Trip to Arlington/D.C. for meetings 1/16/25</td> </tr> <tr> <td colspan="2"><input checked="" type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> </table>				Date 2/22/2025	Payee name Lyft	Amount (\$) 72.19	Payee address; City; State; Zip Code 185 Berry St Ste 400 San Francisco, CA 94107	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Travel Out Of District	Description Trip to Arlington/D.C. for meetings 1/16/25	<input checked="" type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 2/22/2025	Payee name Lyft											
Amount (\$) 72.19	Payee address; City; State; Zip Code 185 Berry St Ste 400 San Francisco, CA 94107											
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Travel Out Of District	Description Trip to Arlington/D.C. for meetings 1/16/25										
	<input checked="" 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									
<table border="1"> <tr> <td>Date 2/26/2025</td> <td>Payee name Amalgamated Bank</td> </tr> <tr> <td>Amount (\$) 55.23</td> <td>Payee address; City; State; Zip Code 275 Seventh Ave. New York, NY 10001</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Fees</td> <td>Description Bank Fees</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> </table>				Date 2/26/2025	Payee name Amalgamated Bank	Amount (\$) 55.23	Payee address; City; State; Zip Code 275 Seventh Ave. New York, NY 10001	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Bank Fees	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 2/26/2025	Payee name Amalgamated Bank											
Amount (\$) 55.23	Payee address; City; State; Zip Code 275 Seventh Ave. New York, NY 10001											
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Bank Fees										
	<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									
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 26 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/27/2025	5 Payee name The Pivot Group Inc															
6 Amount (\$) 2047.50	7 Payee address; 712 H St. NE Unit #606 Washington, DC 20002	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description Walk Lit production														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/27/2025</td> <td>Payee name Z to A Research LLC</td> </tr> <tr> <td>Amount (\$) 14400.00</td> <td>Payee address; 2650 15th St NW Apt 2 Washington, DC 20009</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Polling Expense</td> <td>Description Baseline Poll</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/27/2025	Payee name Z to A Research LLC	Amount (\$) 14400.00	Payee address; 2650 15th St NW Apt 2 Washington, DC 20009	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Polling Expense	Description Baseline Poll	<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
Date 2/27/2025	Payee name Z to A Research LLC															
Amount (\$) 14400.00	Payee address; 2650 15th St NW Apt 2 Washington, DC 20009															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Polling Expense	Description Baseline Poll														
	<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													
<table border="1"> <tr> <td>Date 2/28/2025</td> <td>Payee name Jordan Abelson</td> </tr> <tr> <td>Amount (\$) 3000.00</td> <td>Payee address; 316 Sandy Knoll Dr. Doylestown, PA 18901</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Campaign Staff</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/28/2025	Payee name Jordan Abelson	Amount (\$) 3000.00	Payee address; 316 Sandy Knoll Dr. Doylestown, PA 18901	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff	<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
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Amount (\$) 3000.00	Payee address; 316 Sandy Knoll Dr. Doylestown, PA 18901															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 27 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/28/2025	5 Payee name Flagship Campaigns LLC															
6 Amount (\$) 2500.00	7 Payee address; City; State; Zip Code 7926 Broadway St. #707 San Antonio, TX 78209															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Outreach Consulting														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/28/2025</td> <td>Payee name Barbara Acosta</td> </tr> <tr> <td>Amount (\$) 612.00</td> <td>Payee address; City; State; Zip Code 9414 Graze Branch San Antonio, TX 78211</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/28/2025	Payee name Barbara Acosta	Amount (\$) 612.00	Payee address; City; State; Zip Code 9414 Graze Branch San Antonio, TX 78211	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
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 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 2/28/2025</td> <td>Payee name Daniel Arciniega</td> </tr> <tr> <td>Amount (\$) 2500.00</td> <td>Payee address; City; State; Zip Code 123 South Mesquite St. San Antonio, TX 78203</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Campaign Staff</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/28/2025	Payee name Daniel Arciniega	Amount (\$) 2500.00	Payee address; City; State; Zip Code 123 South Mesquite St. San Antonio, TX 78203	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff	<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
Date 2/28/2025	Payee name Daniel Arciniega															
Amount (\$) 2500.00	Payee address; City; State; Zip Code 123 South Mesquite St. San Antonio, TX 78203															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 28 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/28/2025	5 Payee name Brittany Cordova															
6 Amount (\$) 1400.00	7 Payee address; City; State; Zip Code 9434 Groff Gdn San Antonio, TX 78254															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Campaign Staff														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/28/2025</td> <td>Payee name Tina Acosta</td> </tr> <tr> <td>Amount (\$) 612.00</td> <td>Payee address; City; State; Zip Code 3435 E. Southcross Blvd. #11103 San Antonio, TX 78223</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/28/2025	Payee name Tina Acosta	Amount (\$) 612.00	Payee address; City; State; Zip Code 3435 E. Southcross Blvd. #11103 San Antonio, TX 78223	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/28/2025	Payee name Tina Acosta															
Amount (\$) 612.00	Payee address; City; State; Zip Code 3435 E. Southcross Blvd. #11103 San Antonio, TX 78223															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
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<table border="1"> <tr> <td>Date 2/28/2025</td> <td>Payee name Azucena Gaitan</td> </tr> <tr> <td>Amount (\$) 612.00</td> <td>Payee address; City; State; Zip Code 1211 Patton Blvd. San Antonio, TX 78237</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/28/2025	Payee name Azucena Gaitan	Amount (\$) 612.00	Payee address; City; State; Zip Code 1211 Patton Blvd. San Antonio, TX 78237	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/28/2025	Payee name Azucena Gaitan															
Amount (\$) 612.00	Payee address; City; State; Zip Code 1211 Patton Blvd. San Antonio, TX 78237															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense															
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 29 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)
4 Date 2/28/2025	5 Payee name Anamarie Garcia	
6 Amount (\$) 594.00	7 Payee address; 1418 Melissa Sue San Antonio, TX 78228	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held
Date 2/28/2025	Payee name Esperanza Garcia	
Amount (\$) 720.00	Payee address; 1418 Melissa Sue San Antonio, TX 78228	
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing
	<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
Date 2/28/2025	Payee name Isabell Garcia	
Amount (\$) 612.00	Payee address; 7611 Buckboard Ln. San Antonio, TX 78227	
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 30 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/28/2025	5 Payee name Inez Garcia															
6 Amount (\$) 738.00	7 Payee address; 1666 SW 19th San Antonio, TX 78207	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/28/2025</td> <td>Payee name Jasmine Garcia</td> </tr> <tr> <td>Amount (\$) 378.00</td> <td>Payee address; 6515 Whisper Pond San Antonio, TX 78252</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/28/2025	Payee name Jasmine Garcia	Amount (\$) 378.00	Payee address; 6515 Whisper Pond San Antonio, TX 78252	PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
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Amount (\$) 378.00	Payee address; 6515 Whisper Pond San Antonio, TX 78252															
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 2/28/2025</td> <td>Payee name Stephanie Garcia</td> </tr> <tr> <td>Amount (\$) 612.00</td> <td>Payee address; 3207 Mission River San Antonio, TX 78245</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/28/2025	Payee name Stephanie Garcia	Amount (\$) 612.00	Payee address; 3207 Mission River San Antonio, TX 78245	PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/28/2025	Payee name Stephanie Garcia															
Amount (\$) 612.00	Payee address; 3207 Mission River San Antonio, TX 78245															
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense															
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 31 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/28/2025	5 Payee name Michelle Garcia-Ochoa															
6 Amount (\$) 612.00	7 Payee address; City; State; Zip Code 114 Tipperary Ave. San Antonio, TX 78223															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/28/2025</td> <td>Payee name Crystal Valladolid</td> </tr> <tr> <td>Amount (\$) 612.00</td> <td>Payee address; City; State; Zip Code 322 Clifford Ct. San Antonio, TX 78210</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/28/2025	Payee name Crystal Valladolid	Amount (\$) 612.00	Payee address; City; State; Zip Code 322 Clifford Ct. San Antonio, TX 78210	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/28/2025	Payee name Crystal Valladolid															
Amount (\$) 612.00	Payee address; City; State; Zip Code 322 Clifford Ct. San Antonio, TX 78210															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 2/28/2025</td> <td>Payee name Faye Marie Suficiencia</td> </tr> <tr> <td>Amount (\$) 500.00</td> <td>Payee address; City; State; Zip Code 11847 Claudette St. San Antonio, TX 78252</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Campaign Staff</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/28/2025	Payee name Faye Marie Suficiencia	Amount (\$) 500.00	Payee address; City; State; Zip Code 11847 Claudette St. San Antonio, TX 78252	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff	<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
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Amount (\$) 500.00	Payee address; City; State; Zip Code 11847 Claudette St. San Antonio, TX 78252															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 32 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/28/2025	5 Payee name Amanda Price															
6 Amount (\$) 504.00	7 Payee address; City; State; Zip Code 135 Villa Dr. #12D Universal City, TX 78148															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/28/2025</td> <td>Payee name Andrew Reynosa</td> </tr> <tr> <td>Amount (\$) 126.00</td> <td>Payee address; City; State; Zip Code 1019 W. Woodlawn San Antonio, TX 78201</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/28/2025	Payee name Andrew Reynosa	Amount (\$) 126.00	Payee address; City; State; Zip Code 1019 W. Woodlawn San Antonio, TX 78201	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/28/2025	Payee name Andrew Reynosa															
Amount (\$) 126.00	Payee address; City; State; Zip Code 1019 W. Woodlawn San Antonio, TX 78201															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 2/28/2025</td> <td>Payee name Albert Mora</td> </tr> <tr> <td>Amount (\$) 504.00</td> <td>Payee address; City; State; Zip Code 1418 Melissa Sue San Antonio, TX 78228</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/28/2025	Payee name Albert Mora	Amount (\$) 504.00	Payee address; City; State; Zip Code 1418 Melissa Sue San Antonio, TX 78228	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/28/2025	Payee name Albert Mora															
Amount (\$) 504.00	Payee address; City; State; Zip Code 1418 Melissa Sue San Antonio, TX 78228															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 33 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 2/28/2025	5 Payee name Karelli Guevara															
6 Amount (\$) 1400.00	7 Payee address; 3317 Hagen Loop Laredo, TX 78045	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Campaign Staff														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 2/28/2025</td> <td>Payee name Beth Hudson</td> </tr> <tr> <td>Amount (\$) 800.00</td> <td>Payee address; 111 Forrest Trail Universal City, TX 78148</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Accounting/Banking</td> <td>Description Campaign finance reporting services</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/28/2025	Payee name Beth Hudson	Amount (\$) 800.00	Payee address; 111 Forrest Trail Universal City, TX 78148	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Campaign finance reporting services	<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
Date 2/28/2025	Payee name Beth Hudson															
Amount (\$) 800.00	Payee address; 111 Forrest Trail Universal City, TX 78148															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Campaign finance reporting services														
	<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													
<table border="1"> <tr> <td>Date 2/28/2025</td> <td>Payee name Isaac Ybarra</td> </tr> <tr> <td>Amount (\$) 612.00</td> <td>Payee address; 1666 SW 19th St. San Antonio, TX 78207</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 2/28/2025	Payee name Isaac Ybarra	Amount (\$) 612.00	Payee address; 1666 SW 19th St. San Antonio, TX 78207	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 2/28/2025	Payee name Isaac Ybarra															
Amount (\$) 612.00	Payee address; 1666 SW 19th St. San Antonio, TX 78207															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 34 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/3/2025	5 Payee name SB Digital Inc															
6 Amount (\$) 4800.00	7 Payee address; City; State; Zip Code 2010 Massachusetts Ave NW Second Floor Washington, DC 20036															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Email Messaging Fundraising Website production														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/5/2025</td> <td>Payee name NGP/VAN</td> </tr> <tr> <td>Amount (\$) 1216.86</td> <td>Payee address; City; State; Zip Code 655 15th St. NW Ste 650 Washington, DC 20005</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense</td> <td>Description Mobilize Platform</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/5/2025	Payee name NGP/VAN	Amount (\$) 1216.86	Payee address; City; State; Zip Code 655 15th St. NW Ste 650 Washington, DC 20005	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Mobilize Platform	<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
Date 3/5/2025	Payee name NGP/VAN															
Amount (\$) 1216.86	Payee address; City; State; Zip Code 655 15th St. NW Ste 650 Washington, DC 20005															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Mobilize Platform														
	<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													
<table border="1"> <tr> <td>Date 3/6/2025</td> <td>Payee name QuickBooks/Intuit</td> </tr> <tr> <td>Amount (\$) 101.80</td> <td>Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense</td> <td>Description Accounting Software</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/6/2025	Payee name QuickBooks/Intuit	Amount (\$) 101.80	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Accounting Software	<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
Date 3/6/2025	Payee name QuickBooks/Intuit															
Amount (\$) 101.80	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Accounting Software														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 35 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/7/2025	5 Payee name Anamarie Garcia															
6 Amount (\$) 756.00	7 Payee address; City; State; Zip Code 1418 Melissa Sue San Antonio, TX 78228															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/7/2025</td> <td>Payee name Adan Fernandez-Gonzalez</td> </tr> <tr> <td>Amount (\$) 252.00</td> <td>Payee address; City; State; Zip Code 1503 June Berry San Antonio, TX 78260</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/7/2025	Payee name Adan Fernandez-Gonzalez	Amount (\$) 252.00	Payee address; City; State; Zip Code 1503 June Berry San Antonio, TX 78260	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 3/7/2025	Payee name Adan Fernandez-Gonzalez															
Amount (\$) 252.00	Payee address; City; State; Zip Code 1503 June Berry San Antonio, TX 78260															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
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<table border="1"> <tr> <td>Date 3/7/2025</td> <td>Payee name Azucena Gaitan</td> </tr> <tr> <td>Amount (\$) 504.00</td> <td>Payee address; City; State; Zip Code 1211 Patton Blvd. San Antonio, TX 78237</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/7/2025	Payee name Azucena Gaitan	Amount (\$) 504.00	Payee address; City; State; Zip Code 1211 Patton Blvd. San Antonio, TX 78237	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 3/7/2025	Payee name Azucena Gaitan															
Amount (\$) 504.00	Payee address; City; State; Zip Code 1211 Patton Blvd. San Antonio, TX 78237															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 36 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/7/2025	5 Payee name Tina Acosta															
6 Amount (\$) 504.00	7 Payee address; City; State; Zip Code 3435 E. Southcross Blvd. #11103 San Antonio, TX 78223															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/7/2025</td> <td>Payee name Barbara Acosta</td> </tr> <tr> <td>Amount (\$) 504.00</td> <td>Payee address; City; State; Zip Code 9414 Graze Branch San Antonio, TX 78211</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/7/2025	Payee name Barbara Acosta	Amount (\$) 504.00	Payee address; City; State; Zip Code 9414 Graze Branch San Antonio, TX 78211	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
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Amount (\$) 504.00	Payee address; City; State; Zip Code 9414 Graze Branch San Antonio, TX 78211															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
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<table border="1"> <tr> <td>Date 3/7/2025</td> <td>Payee name Justice Micka</td> </tr> <tr> <td>Amount (\$) 126.00</td> <td>Payee address; City; State; Zip Code 3528 Block Cloud New Braunfels, TX 78130</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/7/2025	Payee name Justice Micka	Amount (\$) 126.00	Payee address; City; State; Zip Code 3528 Block Cloud New Braunfels, TX 78130	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 3/7/2025	Payee name Justice Micka															
Amount (\$) 126.00	Payee address; City; State; Zip Code 3528 Block Cloud New Braunfels, TX 78130															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 37 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/7/2025	5 Payee name Albert Mora															
6 Amount (\$) 702.00	7 Payee address; 1418 Melissa Sue San Antonio, TX 78228	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/7/2025</td> <td>Payee name Michelle Garcia-Ochoa</td> </tr> <tr> <td>Amount (\$) 504.00</td> <td>Payee address; 114 Tipperary Ave. San Antonio, TX 78223</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/7/2025	Payee name Michelle Garcia-Ochoa	Amount (\$) 504.00	Payee address; 114 Tipperary Ave. San Antonio, TX 78223	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 3/7/2025	Payee name Michelle Garcia-Ochoa															
Amount (\$) 504.00	Payee address; 114 Tipperary Ave. San Antonio, TX 78223															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 3/7/2025</td> <td>Payee name Jasmine Garcia</td> </tr> <tr> <td>Amount (\$) 90.00</td> <td>Payee address; 6515 Whisper Pond San Antonio, TX 78252</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/7/2025	Payee name Jasmine Garcia	Amount (\$) 90.00	Payee address; 6515 Whisper Pond San Antonio, TX 78252	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 3/7/2025	Payee name Jasmine Garcia															
Amount (\$) 90.00	Payee address; 6515 Whisper Pond San Antonio, TX 78252															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 38 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/7/2025	5 Payee name Stephanie Garcia															
6 Amount (\$) 504.00	7 Payee address; 3207 Mission River San Antonio, TX 78245	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/7/2025</td> <td>Payee name Isabell Garcia</td> </tr> <tr> <td>Amount (\$) 504.00</td> <td>Payee address; 7611 Buckboard Ln. San Antonio, TX 78227</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/7/2025	Payee name Isabell Garcia	Amount (\$) 504.00	Payee address; 7611 Buckboard Ln. San Antonio, TX 78227	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 3/7/2025	Payee name Isabell Garcia															
Amount (\$) 504.00	Payee address; 7611 Buckboard Ln. San Antonio, TX 78227															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 3/7/2025</td> <td>Payee name Inez Garcia</td> </tr> <tr> <td>Amount (\$) 378.00</td> <td>Payee address; 1666 SW 19th San Antonio, TX 78207</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/7/2025	Payee name Inez Garcia	Amount (\$) 378.00	Payee address; 1666 SW 19th San Antonio, TX 78207	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 3/7/2025	Payee name Inez Garcia															
Amount (\$) 378.00	Payee address; 1666 SW 19th San Antonio, TX 78207															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 39 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/7/2025	5 Payee name Esperanza Garcia															
6 Amount (\$) 504.00	7 Payee address; 1418 Melissa Sue San Antonio, TX 78228	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/7/2025</td> <td>Payee name Crystal Valladolid</td> </tr> <tr> <td>Amount (\$) 756.00</td> <td>Payee address; 322 Clifford Ct. San Antonio, TX 78210</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/7/2025	Payee name Crystal Valladolid	Amount (\$) 756.00	Payee address; 322 Clifford Ct. San Antonio, TX 78210	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 3/7/2025	Payee name Crystal Valladolid															
Amount (\$) 756.00	Payee address; 322 Clifford Ct. San Antonio, TX 78210															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 3/7/2025</td> <td>Payee name Isaac Ybarra</td> </tr> <tr> <td>Amount (\$) 756.00</td> <td>Payee address; 1666 SW 19th St. San Antonio, TX 78207</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/7/2025	Payee name Isaac Ybarra	Amount (\$) 756.00	Payee address; 1666 SW 19th St. San Antonio, TX 78207	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
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Amount (\$) 756.00	Payee address; 1666 SW 19th St. San Antonio, TX 78207															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED																

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 40 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/11/2025	5 Payee name Spectrum															
6 Amount (\$) 95.49	7 Payee address; 400 Washington Blvd. Stamford, CT 06902	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Campaign office internet services														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/13/2025</td> <td>Payee name MAS Strategy</td> </tr> <tr> <td>Amount (\$) 8308.90</td> <td>Payee address; 3700 Cole Ave. #231 Dallas, TX 75204</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense</td> <td>Description Fundraising Consulting</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/13/2025	Payee name MAS Strategy	Amount (\$) 8308.90	Payee address; 3700 Cole Ave. #231 Dallas, TX 75204	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description Fundraising Consulting	<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
Date 3/13/2025	Payee name MAS Strategy															
Amount (\$) 8308.90	Payee address; 3700 Cole Ave. #231 Dallas, TX 75204															
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	<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													
<table border="1"> <tr> <td>Date 3/14/2025</td> <td>Payee name Flagship Campaigns LLC</td> </tr> <tr> <td>Amount (\$) 2500.00</td> <td>Payee address; 7926 Broadway St. #707 San Antonio, TX 78209</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Consulting Expense</td> <td>Description Outreach Consulting</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/14/2025	Payee name Flagship Campaigns LLC	Amount (\$) 2500.00	Payee address; 7926 Broadway St. #707 San Antonio, TX 78209	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description Outreach Consulting	<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
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Amount (\$) 2500.00	Payee address; 7926 Broadway St. #707 San Antonio, TX 78209															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description Outreach Consulting														
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 41 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/14/2025	5 Payee name Barbara Acosta															
6 Amount (\$) 720.00	7 Payee address; City; State; Zip Code 9414 Graze Branch San Antonio, TX 78211															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/14/2025</td> <td>Payee name Tina Acosta</td> </tr> <tr> <td>Amount (\$) 594.00</td> <td>Payee address; City; State; Zip Code 3435 E. Southcross Blvd. #11103 San Antonio, TX 78223</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/14/2025	Payee name Tina Acosta	Amount (\$) 594.00	Payee address; City; State; Zip Code 3435 E. Southcross Blvd. #11103 San Antonio, TX 78223	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
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Amount (\$) 594.00	Payee address; City; State; Zip Code 3435 E. Southcross Blvd. #11103 San Antonio, TX 78223															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense															
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<table border="1"> <tr> <td>Date 3/14/2025</td> <td>Payee name Daniel Arciniega</td> </tr> <tr> <td>Amount (\$) 2500.00</td> <td>Payee address; City; State; Zip Code 123 South Mesquite St. San Antonio, TX 78203</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Campaign Staff</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/14/2025	Payee name Daniel Arciniega	Amount (\$) 2500.00	Payee address; City; State; Zip Code 123 South Mesquite St. San Antonio, TX 78203	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff	<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
Date 3/14/2025	Payee name Daniel Arciniega															
Amount (\$) 2500.00	Payee address; City; State; Zip Code 123 South Mesquite St. San Antonio, TX 78203															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 42 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/14/2025	5 Payee name Azucena Gaitan															
6 Amount (\$) 504.00	7 Payee address; City; State; Zip Code 1211 Patton Blvd. San Antonio, TX 78237															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/14/2025</td> <td>Payee name Adan Fernandez-Gonzalez</td> </tr> <tr> <td>Amount (\$) 252.00</td> <td>Payee address; City; State; Zip Code 1503 June Berry San Antonio, TX 78260</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/14/2025	Payee name Adan Fernandez-Gonzalez	Amount (\$) 252.00	Payee address; City; State; Zip Code 1503 June Berry San Antonio, TX 78260	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 3/14/2025	Payee name Adan Fernandez-Gonzalez															
Amount (\$) 252.00	Payee address; City; State; Zip Code 1503 June Berry San Antonio, TX 78260															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 3/14/2025</td> <td>Payee name Brittany Cordova</td> </tr> <tr> <td>Amount (\$) 1400.00</td> <td>Payee address; City; State; Zip Code 9434 Groff Gdn San Antonio, TX 78254</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Campaign Staff</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/14/2025	Payee name Brittany Cordova	Amount (\$) 1400.00	Payee address; City; State; Zip Code 9434 Groff Gdn San Antonio, TX 78254	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff	<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
Date 3/14/2025	Payee name Brittany Cordova															
Amount (\$) 1400.00	Payee address; City; State; Zip Code 9434 Groff Gdn San Antonio, TX 78254															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 43 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)
4 Date 3/14/2025	5 Payee name Anamarie Garcia	
6 Amount (\$) 612.00	7 Payee address; 1418 Melissa Sue San Antonio, TX 78228	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held
Date 3/14/2025	Payee name Esperanza Garcia	
Amount (\$) 612.00	Payee address; 1418 Melissa Sue San Antonio, TX 78228	
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing
	<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
Date 3/14/2025	Payee name Isabell Garcia	
Amount (\$) 630.00	Payee address; 7611 Buckboard Ln. San Antonio, TX 78227	
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 44 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/14/2025	5 Payee name Inez Garcia															
6 Amount (\$) 720.00	7 Payee address; 1666 SW 19th San Antonio, TX 78207	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/14/2025</td> <td>Payee name Jasmine Garcia</td> </tr> <tr> <td>Amount (\$) 378.00</td> <td>Payee address; 6515 Whisper Pond San Antonio, TX 78252</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/14/2025	Payee name Jasmine Garcia	Amount (\$) 378.00	Payee address; 6515 Whisper Pond San Antonio, TX 78252	PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
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Amount (\$) 378.00	Payee address; 6515 Whisper Pond San Antonio, TX 78252															
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 3/14/2025</td> <td>Payee name Michelle Garcia-Ochoa</td> </tr> <tr> <td>Amount (\$) 594.00</td> <td>Payee address; 114 Tipperary Ave. San Antonio, TX 78223</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/14/2025	Payee name Michelle Garcia-Ochoa	Amount (\$) 594.00	Payee address; 114 Tipperary Ave. San Antonio, TX 78223	PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
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Amount (\$) 594.00	Payee address; 114 Tipperary Ave. San Antonio, TX 78223															
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense															
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 45 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/14/2025	5 Payee name Stephanie Garcia															
6 Amount (\$) 630.00	7 Payee address; City; State; Zip Code 3207 Mission River San Antonio, TX 78245															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/14/2025</td> <td>Payee name Albert Mora</td> </tr> <tr> <td>Amount (\$) 504.00</td> <td>Payee address; City; State; Zip Code 1418 Melissa Sue San Antonio, TX 78228</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/14/2025	Payee name Albert Mora	Amount (\$) 504.00	Payee address; City; State; Zip Code 1418 Melissa Sue San Antonio, TX 78228	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
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Amount (\$) 504.00	Payee address; City; State; Zip Code 1418 Melissa Sue San Antonio, TX 78228															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 3/14/2025</td> <td>Payee name Justice Micka</td> </tr> <tr> <td>Amount (\$) 216.00</td> <td>Payee address; City; State; Zip Code 3528 Block Cloud New Braunfels, TX 78130</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/14/2025	Payee name Justice Micka	Amount (\$) 216.00	Payee address; City; State; Zip Code 3528 Block Cloud New Braunfels, TX 78130	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 46 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/14/2025	5 Payee name Beth Hudson															
6 Amount (\$) 800.00	7 Payee address; 111 Forrest Trail Universal City, TX 78148	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description Campaign finance reporting services														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/14/2025</td> <td>Payee name Karelli Guevara</td> </tr> <tr> <td>Amount (\$) 1400.00</td> <td>Payee address; 3317 Hagen Loop Laredo, TX 78045</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Campaign Staff</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/14/2025	Payee name Karelli Guevara	Amount (\$) 1400.00	Payee address; 3317 Hagen Loop Laredo, TX 78045	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff	<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
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Amount (\$) 1400.00	Payee address; 3317 Hagen Loop Laredo, TX 78045															
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	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense															
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<table border="1"> <tr> <td>Date 3/14/2025</td> <td>Payee name Andrew Reynosa</td> </tr> <tr> <td>Amount (\$) 126.00</td> <td>Payee address; 1019 W. Woodlawn San Antonio, TX 78201</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/14/2025	Payee name Andrew Reynosa	Amount (\$) 126.00	Payee address; 1019 W. Woodlawn San Antonio, TX 78201	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 3/14/2025	Payee name Andrew Reynosa															
Amount (\$) 126.00	Payee address; 1019 W. Woodlawn San Antonio, TX 78201															
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	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense															
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 47 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/14/2025	5 Payee name Manuel Moses Polanco Gonzalez															
6 Amount (\$) 150.00	7 Payee address; City; State; Zip Code 5307 Hayden Dr. San Antonnio, TX 78242															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Campaign Staff														
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense															
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<table border="1"> <tr> <td>Date 3/14/2025</td> <td>Payee name Faye Marie Suficiencia</td> </tr> <tr> <td>Amount (\$) 500.00</td> <td>Payee address; City; State; Zip Code 11847 Claudette St. San Antonio, TX 78252</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Campaign Staff</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/14/2025	Payee name Faye Marie Suficiencia	Amount (\$) 500.00	Payee address; City; State; Zip Code 11847 Claudette St. San Antonio, TX 78252	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Campaign Staff	<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
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<table border="1"> <tr> <td>Date 3/14/2025</td> <td>Payee name Crystal Valladolid</td> </tr> <tr> <td>Amount (\$) 630.00</td> <td>Payee address; City; State; Zip Code 322 Clifford Ct. San Antonio, TX 78210</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/14/2025	Payee name Crystal Valladolid	Amount (\$) 630.00	Payee address; City; State; Zip Code 322 Clifford Ct. San Antonio, TX 78210	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 3/14/2025	Payee name Crystal Valladolid															
Amount (\$) 630.00	Payee address; City; State; Zip Code 322 Clifford Ct. San Antonio, TX 78210															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 48 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/14/2025	5 Payee name Isaac Ybarra															
6 Amount (\$) 630.00	7 Payee address; City; State; Zip Code 1666 SW 19th St. San Antonio, TX 78207															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/17/2025</td> <td>Payee name Canva</td> </tr> <tr> <td>Amount (\$) 50.00</td> <td>Payee address; City; State; Zip Code 3212 E. Cesar Chavez St. Bldg 1 Ste 1300 Austin, TX 78702</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense</td> <td>Description Campaign software subscription</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/17/2025	Payee name Canva	Amount (\$) 50.00	Payee address; City; State; Zip Code 3212 E. Cesar Chavez St. Bldg 1 Ste 1300 Austin, TX 78702	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Campaign software subscription	<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
Date 3/17/2025	Payee name Canva															
Amount (\$) 50.00	Payee address; City; State; Zip Code 3212 E. Cesar Chavez St. Bldg 1 Ste 1300 Austin, TX 78702															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Campaign software subscription														
	<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													
<table border="1"> <tr> <td>Date 3/17/2025</td> <td>Payee name QuickBooks/Intuit</td> </tr> <tr> <td>Amount (\$) 341.17</td> <td>Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense</td> <td>Description Accounting Software</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/17/2025	Payee name QuickBooks/Intuit	Amount (\$) 341.17	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Accounting Software	<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
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Amount (\$) 341.17	Payee address; City; State; Zip Code 2632 Marine Way Mountain View, CA 94043															
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	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 49 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/21/2025	5 Payee name Anamarie Garcia															
6 Amount (\$) 756.00	7 Payee address; 1418 Melissa Sue San Antonio, TX 78228	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/21/2025</td> <td>Payee name Adan Fernandez-Gonzalez</td> </tr> <tr> <td>Amount (\$) 378.00</td> <td>Payee address; 1503 June Berry San Antonio, TX 78260</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/21/2025	Payee name Adan Fernandez-Gonzalez	Amount (\$) 378.00	Payee address; 1503 June Berry San Antonio, TX 78260	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
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Amount (\$) 378.00	Payee address; 1503 June Berry San Antonio, TX 78260															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 3/21/2025</td> <td>Payee name Azucena Gaitan</td> </tr> <tr> <td>Amount (\$) 504.00</td> <td>Payee address; 1211 Patton Blvd. San Antonio, TX 78237</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/21/2025	Payee name Azucena Gaitan	Amount (\$) 504.00	Payee address; 1211 Patton Blvd. San Antonio, TX 78237	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
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Amount (\$) 504.00	Payee address; 1211 Patton Blvd. San Antonio, TX 78237															
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 50 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/21/2025	5 Payee name Tina Acosta															
6 Amount (\$) 252.00	7 Payee address; City; State; Zip Code 3435 E. Southcross Blvd. #11103 San Antonio, TX 78223															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/21/2025</td> <td>Payee name Barbara Acosta</td> </tr> <tr> <td>Amount (\$) 504.00</td> <td>Payee address; City; State; Zip Code 9414 Graze Branch San Antonio, TX 78211</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/21/2025	Payee name Barbara Acosta	Amount (\$) 504.00	Payee address; City; State; Zip Code 9414 Graze Branch San Antonio, TX 78211	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
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Amount (\$) 504.00	Payee address; City; State; Zip Code 9414 Graze Branch San Antonio, TX 78211															
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<table border="1"> <tr> <td>Date 3/21/2025</td> <td>Payee name Andrew Reynosa</td> </tr> <tr> <td>Amount (\$) 126.00</td> <td>Payee address; City; State; Zip Code 1019 W. Woodlawn San Antonio, TX 78201</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/21/2025	Payee name Andrew Reynosa	Amount (\$) 126.00	Payee address; City; State; Zip Code 1019 W. Woodlawn San Antonio, TX 78201	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 3/21/2025	Payee name Andrew Reynosa															
Amount (\$) 126.00	Payee address; City; State; Zip Code 1019 W. Woodlawn San Antonio, TX 78201															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense															
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 51 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/21/2025	5 Payee name Justice Micka															
6 Amount (\$) 504.00	7 Payee address; City; State; Zip Code 3528 Block Cloud New Braunfels, TX 78130															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/21/2025</td> <td>Payee name Albert Mora</td> </tr> <tr> <td>Amount (\$) 810.00</td> <td>Payee address; City; State; Zip Code 1418 Melissa Sue San Antonio, TX 78228</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/21/2025	Payee name Albert Mora	Amount (\$) 810.00	Payee address; City; State; Zip Code 1418 Melissa Sue San Antonio, TX 78228	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
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<table border="1"> <tr> <td>Date 3/21/2025</td> <td>Payee name Stephanie Garcia</td> </tr> <tr> <td>Amount (\$) 720.00</td> <td>Payee address; City; State; Zip Code 3207 Mission River San Antonio, TX 78245</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/21/2025	Payee name Stephanie Garcia	Amount (\$) 720.00	Payee address; City; State; Zip Code 3207 Mission River San Antonio, TX 78245	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
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Amount (\$) 720.00	Payee address; City; State; Zip Code 3207 Mission River San Antonio, TX 78245															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense															
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 52 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/21/2025	5 Payee name Michelle Garcia-Ochoa															
6 Amount (\$) 756.00	7 Payee address; City; State; Zip Code 114 Tipperary Ave. San Antonio, TX 78223															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/21/2025</td> <td>Payee name Jasmine Garcia</td> </tr> <tr> <td>Amount (\$) 504.00</td> <td>Payee address; City; State; Zip Code 6515 Whisper Pond San Antonio, TX 78252</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/21/2025	Payee name Jasmine Garcia	Amount (\$) 504.00	Payee address; City; State; Zip Code 6515 Whisper Pond San Antonio, TX 78252	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/21/2025</td> <td>Payee name Kimberly T. Garcia</td> </tr> <tr> <td>Amount (\$) 378.00</td> <td>Payee address; City; State; Zip Code 3207 Mission River San Antonio, TX 78245</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/21/2025	Payee name Kimberly T. Garcia	Amount (\$) 378.00	Payee address; City; State; Zip Code 3207 Mission River San Antonio, TX 78245	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 3/21/2025	Payee name Kimberly T. Garcia															
Amount (\$) 378.00	Payee address; City; State; Zip Code 3207 Mission River San Antonio, TX 78245															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 53 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/21/2025	5 Payee name Inez Garcia															
6 Amount (\$) 756.00	7 Payee address; 1666 SW 19th San Antonio, TX 78207	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/21/2025</td> <td>Payee name Isabell Garcia</td> </tr> <tr> <td>Amount (\$) 720.00</td> <td>Payee address; 7611 Buckboard Ln. San Antonio, TX 78227</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/21/2025	Payee name Isabell Garcia	Amount (\$) 720.00	Payee address; 7611 Buckboard Ln. San Antonio, TX 78227	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 3/21/2025	Payee name Isabell Garcia															
Amount (\$) 720.00	Payee address; 7611 Buckboard Ln. San Antonio, TX 78227															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 3/21/2025</td> <td>Payee name Esperanza Garcia</td> </tr> <tr> <td>Amount (\$) 756.00</td> <td>Payee address; 1418 Melissa Sue San Antonio, TX 78228</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/21/2025	Payee name Esperanza Garcia	Amount (\$) 756.00	Payee address; 1418 Melissa Sue San Antonio, TX 78228	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 3/21/2025	Payee name Esperanza Garcia															
Amount (\$) 756.00	Payee address; 1418 Melissa Sue San Antonio, TX 78228															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 54 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)														
4 Date 3/21/2025	5 Payee name Crystal Valladolid															
6 Amount (\$) 756.00	7 Payee address; City; State; Zip Code 322 Clifford Ct. San Antonio, TX 78210															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Outreach/canvassing														
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 3/21/2025</td> <td>Payee name Isaac Ybarra</td> </tr> <tr> <td>Amount (\$) 756.00</td> <td>Payee address; City; State; Zip Code 1666 SW 19th St. San Antonio, TX 78207</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor</td> <td>Description Outreach/canvassing</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/21/2025	Payee name Isaac Ybarra	Amount (\$) 756.00	Payee address; City; State; Zip Code 1666 SW 19th St. San Antonio, TX 78207	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing	<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
Date 3/21/2025	Payee name Isaac Ybarra															
Amount (\$) 756.00	Payee address; City; State; Zip Code 1666 SW 19th St. San Antonio, TX 78207															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Outreach/canvassing														
	<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													
<table border="1"> <tr> <td>Date 3/24/2025</td> <td>Payee name Democracy Engine</td> </tr> <tr> <td>Amount (\$) 62.54</td> <td>Payee address; City; State; Zip Code 2125 14TH STREET NW #101W Washington, DC 20009</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Fees</td> <td>Description Processing Fees</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 3/24/2025	Payee name Democracy Engine	Amount (\$) 62.54	Payee address; City; State; Zip Code 2125 14TH STREET NW #101W Washington, DC 20009	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Processing Fees	<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
Date 3/24/2025	Payee name Democracy Engine															
Amount (\$) 62.54	Payee address; City; State; Zip Code 2125 14TH STREET NW #101W Washington, DC 20009															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Processing Fees														
	<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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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: 55 of 55	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)	
4 Date 3/24/2025	5 Payee name Actblue		
6 Amount (\$) 2289.16	7 Payee address; PO Box 441146 Somerville, MA 02144	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Processing Fees	
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)		Description
	<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
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)		Description
	<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			

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	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 F2: 1 of 1	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$ 0
5 Date	6 Payee name	
7 Amount (\$)	8 Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<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

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PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F3: 1 of 1
2 FILER NAME Gina O Jones		3 Filer ID (Ethics Commission Filers)
4 Date	5 Name of person from whom investment is purchased 	
	6 Address of person from whom investment is purchased; City; State; Zip Code	
	7 Description of investment	
	8 Amount of investment (\$)	
Date	Name of person from whom investment is purchased 	
	Address of person from whom investment is purchased; City; State; Zip Code	
	Description of investment	
	Amount of investment (\$)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	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 F4: 1 of 1	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 0	
5 Date	6 Payee name		
7 Amount (\$)	8 Payee address; City; State; Zip Code		
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)		Description
	<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

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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 G: 1 of 1	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee Name	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
Office held		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<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		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<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		

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PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	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	Gifts/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 H: 1 of 1	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)	
4 Date	5 Business name		
6 Amount (\$)	7 Business address; City; State; Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description	
	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Business name		
Amount (\$)	Business address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)		Description
	<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
Date	Business name		
Amount (\$)	Business address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)		Description
	<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			

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: 1 of 1	2 FILER NAME Gina O Jones	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.)	(b) Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)

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INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule K: 1 of 1</p>
<p>2 FILER NAME Gina O Jones</p>		<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 Date</p>	<p>5 Name of person from whom amount is received </p> <p>6 Address of person from whom amount is received; City; State; Zip Code </p>	<p>8 Amount (\$)</p>
	<p>7 Purpose for which amount is received</p>	<input type="checkbox"/> Check if political contribution returned to filer
	<p>Name of person from whom amount is received </p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	
<p>Date</p>	<p>Name of person from whom amount is received </p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	<p>Amount (\$)</p>
	<p>Purpose for which amount is received</p>	<input type="checkbox"/> Check if political contribution returned to filer
	<p>Name of person from whom amount is received </p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	
<p>Date</p>	<p>Name of person from whom amount is received </p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	<p>Amount (\$)</p>
	<p>Purpose for which amount is received</p>	<input type="checkbox"/> Check if political contribution returned to filer
	<p>Name of person from whom amount is received </p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	
<p>Date</p>	<p>Name of person from whom amount is received </p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	<p>Amount (\$)</p>
	<p>Purpose for which amount is received</p>	<input type="checkbox"/> Check if political contribution returned to filer
	<p>Name of person from whom amount is received </p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	

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IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule T: 1 of 1</p>												
<p>2 FILER NAME Gina O Jones</p>		<p>3 Filer ID (Ethics Commission Filers)</p>												
<p>4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee Lyft</p>														
<p>5 Contribution / Expenditure reported on:</p> <table> <tr> <td><input type="checkbox"/> Schedule A2</td> <td><input type="checkbox"/> Schedule B</td> <td><input type="checkbox"/> Schedule B(J)</td> <td><input type="checkbox"/> Schedule C2</td> <td><input type="checkbox"/> Schedule D</td> <td><input checked="" type="checkbox"/> Schedule F1</td> </tr> <tr> <td><input type="checkbox"/> Schedule F2</td> <td><input type="checkbox"/> Schedule F4</td> <td><input type="checkbox"/> Schedule G</td> <td><input type="checkbox"/> Schedule H</td> <td><input type="checkbox"/> Schedule COH-UC</td> <td><input type="checkbox"/> Schedule B-SS</td> </tr> </table>			<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input checked="" type="checkbox"/> Schedule F1	<input type="checkbox"/> Schedule F2	<input type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	<input type="checkbox"/> Schedule B-SS
<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input checked="" type="checkbox"/> Schedule F1									
<input type="checkbox"/> Schedule F2	<input type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	<input type="checkbox"/> Schedule B-SS									
<p>6 Dates of travel 1/16/2025</p>	<p>7 Name of person(s) traveling Gina Ortiz Jones</p>													
	<p>8 Departure city or name of departure location San Antonio</p>													
	<p>9 Destination city or name of destination location Washington DC</p>													
<p>10 Means of transportation ride share</p>	<p>11 Purpose of travel (including name of conference, seminar, or other event) Trip to Arlington/D.C. for meetings</p>													
<p>Name of Contributor / Corporation or Labor Organization / Pledgor / Payee</p>														
<p>Contribution / Expenditure reported on:</p> <table> <tr> <td><input type="checkbox"/> Schedule A2</td> <td><input type="checkbox"/> Schedule B</td> <td><input type="checkbox"/> Schedule B(J)</td> <td><input type="checkbox"/> Schedule C2</td> <td><input type="checkbox"/> Schedule D</td> <td><input type="checkbox"/> Schedule F1</td> </tr> <tr> <td><input type="checkbox"/> Schedule F2</td> <td><input type="checkbox"/> Schedule F4</td> <td><input type="checkbox"/> Schedule G</td> <td><input type="checkbox"/> Schedule H</td> <td><input type="checkbox"/> Schedule COH-UC</td> <td><input type="checkbox"/> Schedule B-SS</td> </tr> </table>			<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1	<input type="checkbox"/> Schedule F2	<input type="checkbox"/> Schedule F4	<input type="checkbox"/> Schedule G	<input type="checkbox"/> Schedule H	<input type="checkbox"/> Schedule COH-UC	<input type="checkbox"/> Schedule B-SS
<input type="checkbox"/> Schedule A2	<input type="checkbox"/> Schedule B	<input type="checkbox"/> Schedule B(J)	<input type="checkbox"/> Schedule C2	<input type="checkbox"/> Schedule D	<input type="checkbox"/> Schedule F1									
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<p>Dates of travel</p>	<p>Name of person(s) traveling</p>													
	<p>Departure city or name of departure location</p>													
	<p>Destination city or name of destination location</p>													
<p>Means of transportation</p>	<p>Purpose of travel (including name of conference, seminar, or other event)</p>													
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<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p>														

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.
•• Complete only if "Report Type" on page 1 is marked "Final Report" ••

C/OH NAME
Gina O Jones

Filer ID (Ethics Commission Filers)

SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder

FILER WHO IS NOT AN OFFICEHOLDER

•• Complete A & B below *only* if you are not an officeholder. ••

A. CAMPAIGN FUNDS

Check only one:

I do not have unexpended contributions or unexpended interest or income earned from political contributions.

I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

I do not retain assets purchased with political contributions or interest or other income from political contributions.

I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

OFFICEHOLDER

•• Complete this section *only* if you are an officeholder. ••

I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder