## **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: 41
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	<sub>FIRST</sub>	мі <b>J</b>	OFFICE USE ONLY
NAME	NICKNAME	Chidgey	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX 24710 Garde	APT / SUITE #; en Way, San Anto	CITY; STATE; ZIP CODE onio, TX, 78260	4/3/2024
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (210 )	PHONE NUMBER 260-5278	EXTENSION	Date Hand-delivered or Date Postmarked  Receipt # Amount \$
6 CAMPAIGN TREASURER NAME	MS / MRS / MR  Mr  NICKNAME	Joseph  LAST  Chidgey	MI J SUFFIX	Date Processed  Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		no po box please); apt en Way, San Ant		STATE; ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE ( 210 )	PHONE NUMBER 365-6995	EXTENSION	
9 REPORT TYPE	January 15 July 15	30th day before	Currended Medified	15th day after campaign treasurer appointment (Officeholder Only)  Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month 1	Day Year	THROUGH 3	Day Year 25 24
11 ELECTION	Month Day  5 4	Year Prima  24 Gener	Description	
12 OFFICE	OFFICE HELD (if any)	,	13 OFFICE SOUGHT (if known NEISD School I	<i>'</i>
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFICE CONSENT. CANDIDATES	SEHOLDER. THESE EXPENDITU SAND OFFICEHOLDERS ARE REC		MADE BY POLITICAL COMMITTEES TO SUPPORT DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR THEY RECEIVE NOTICE OF SUCH EXPENDITURES.
	COMMITTEE TYPE	COMMITTEE NAME  COMMITTEE ADDRESS		
Additional Pages	GENERAL SPECIFIC	COMMITTEE CAMPAIGN T	TREASURER NAME	
	GF EGII 10	COMMITTEE CAMPAIGN	TREASURER ADDRESS	
		COMMITTEE CAMIFAIGN	THE TOTAL ADDRESS	
		GO TO	O PAGE 2	

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

15 C/OH NAME Terri J. Chidgey			16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS		LITICAL CONTRIBUTIONS (OTHER THAN BUARANTEES OF LOANS, OR ELECTRONICALLY)	\$ 1,561.54
	2. TOTAL POLITICAL COI (OTHER THAN PLEDGES,	NTRIBUTIONS , LOANS, OR GUARANTEES OF LOANS)	\$ 19,706.14
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POL	ITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXP	PENDITURES	\$ 4,934.01
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTR OF REPORTING PERIOD	RIBUTIONS MAINTAINED AS OF THE LAS	\$ 14,133.69
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOU LAST DAY OF THE REPO	NT OF ALL OUTSTANDING LOANS AS OF RTING PERIOD	\$ 2,000.00
	wear, or affirm, under penalty of perj quired to be reported by me under Title		e and correct and includes all information
		Signature of Ca	huggly  ndidate or Office holder
	Please co	omplete either option below	r:
(1) Affidavit			
NOTARY STAMP/SEAL	_		
Sworn to and subscribed	before me by	this the	day of,
20, to certify	which, witness my hand and seal of offi	ce.	
Signature of officer administer	ring oath Printed name	of officer administering oath	Title of officer administering oath
		OR	
(2) Unsworn Declaration	on		
My name is Terri J. Ch		, and my date of birth is	09/26/1955
My address is 24710 G	arden Way	San Antonio , T	78260 , USA .
Executed in Bexar	(street) County, State of Texas	, on the 3rd day of April	udgly
		Signature of Candid	ate/Officeholder (Declarant)

# **SUBTOTALS - C/OH**

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

	J. Chidgey	20 Filer ID (Ethics Co	mmiss	sion Filers)
	HEDULE SUBTOTALS ME OF SCHEDULE			SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	19,706.14
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	1,561.54
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.	SCHEDULE E: LOANS		\$	2,000.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$	4,934.01
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$	0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	NDS	\$	0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$	0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$	0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER	IONS RETURNED	\$	0.00

#### SCHEDULE A1

If the reques	ted information is not applicable, <b>DO NOT incl</b> u	ide this page in the r	eport.
The	Instruction Guide explains how to complete this fo	rm.	1 Total pages Schedule A1: 29
<sup>2</sup> FILER NAME Terri J. Ch	idgey		3 Filer ID (Ethics Commission Filers)
4 Date 01/14/2024	5 Full name of contributor out-of-state PAC (ID#:) Joseph Chidgey 6 Contributor address; City; State; Zip Code 24710 Garden Way, San Antonio, TX 78260		7 Amount of contribution (\$)  3.00
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (ID:	#:)	Amount of contribution (\$)
01/17/2024		State; Zip Code e, TX 76567	1,500.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 01/21/2024	Full name of contributor  Angi Aramburu  Contributor address;  City;  22827 Wichita Pass, San Anton	State; Zip Code	Amount of contribution (\$) 98.14
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 01/24/2024	Full name of contributor out-of-state PAC (ID:  Cindy Glen  Contributor address; City;	#:) State; Zip Code	Amount of contribution (\$)
	404 Meadowbrook Dr, San Antor	nio, TX 78232	100.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
	ATTACH ADDITIONAL COPIES OF	THIS SOUPERING TAXABLE	

#### SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME Terri J. Ch		3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	5 Full name of contributor out-of-state PAC (ID#:	
01/24/2024	6 Contributor address; City; State; Zip Code 26238 Tuscan Woods, San Antonio, TX 782	
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See	Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
01/24/2024	Contributor address; City; State; Zip Cod 13323 Vista Bonita, San Antonio, TX 782	· 100.00
Principal occup	eation / Job title (See Instructions)  Employer (See	Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
01/24/2024	Celia Borgeson  Contributor address; City; State; Zip Code  880 Stoney Ridge Rd, Bulverde, TX 781	• 50.00
Principal occup	pation / Job title (See Instructions)  Employer (See	Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	) Amount of contribution (\$)
01/25/2024	Contributor address; City; State; Zip Code  132 Green Brook Place, Cibolo, TX 781	
Principal occup	pation / Job title (See Instructions)  Employer (See	

#### SCHEDULE A1

If the reques	ted information is not applicable, <b>DO NOT include</b>	this page in the re	port.
The	Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch	idgey	:	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#: Colleen Bohrmann		7 Amount of contribution (\$)
01/25/2024	6 Contributor address; City; State 19803 Park Ranch, San Antonio,	· .	100.00
8 Principal occu		nployer (See Instruction	ns)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)
01/26/2024	Contributor address; City; State  13811 Jess Gardens, San Antonio,	•	250.00
Principal occup	ation / Job title (See Instructions)	nployer (See Instruction	ns)
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of contribution (\$)
01/26/2024	Samantha Mokate  Contributor address; City; State  252 Wilderness Creek, Canyon Lake	; Zip Code , TX 78133	150.00
Principal occup	ation / Job title (See Instructions)	l nployer (See Instruction	ns)
Date	Full name of contributor out-of-state PAC (ID#:  Christopher Smith	)	Amount of contribution (\$)
01/28/2024	Contributor address; City; State 23147 Osprey Ridge, San Antonio		250.00
Principal occup		nployer (See Instruction	ns)
	ATTACH ADDITIONAL COPIES OF THE		

#### SCHEDULE A1

If the reques	ted information is not applicable, <b>DO NOT</b>	include this page in the	report.
The	Instruction Guide explains how to complete t	his form.	1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch	idgey		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:) Susan Guess		7 Amount of contribution (\$)
01/28/2024	6 Contributor address; City; 23147 Osprey Ridge, San Ar	State; Zip Code	250.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor out-of-state  Amy Dodge	PAC (ID#:)	Amount of contribution (\$)
01/28/2024	Contributor address; City;  3 Inwood Moss, San Anto	State; Zip Code	10.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ions)
Date		PAC (ID#:)	Amount of contribution (\$)
01/28/2024	Susie Armstrong  Contributor address;  City;  2023 Thicket Trail Drive, San A	State; Zip Code Antonio, TX 78248	50.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state	PAC (ID#:)	Amount of contribution (\$)
01/28/2024	Contributor address; City;  1414 Lightstone Drive, San A	State; Zip Code	100.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruct	ions)
	ATTACH ADDITIONAL COPIE	S OF THIS SCHEDULE AS N	FEDED

#### SCHEDULE A1

		1 Total pages Schedule A1:
The	Instruction Guide explains how to complete this form.	1 10th, pages 00.000.00
Terri J. Ch	idgey	3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	5 Full name of contributor out-of-state PAC (ID#:  Kathryn Hutcheson	
01/28/2024	6 Contributor address; City; State; Zip C	250.00
	21 Sendero Verde, San Antonio, TX 78	8261
<b>3</b> Principal occu	pation / Job title (See Instructions)  9 Employer (S	See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
01/28/2024	Mary Swain	1 000 00
	Contributor address; City; State; Zip C	1,000.00
	15 Remington Run, San Antonio, TX 7	8258
Principal occup	ation / Job title (See Instructions) Employer (S	See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
01/28/2024	Gabby Woolard	100 00
31/LO/LOL+	Contributor address; City; State; Zip C	100.00
	23814 Viento Oaks, San Antonio, TX 7	8260
Principal occup	eation / Job title (See Instructions) Employer (S	See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	) Amount of contribution (\$)
01/28/2024	Rachel Crosland	400.00
01/20/2024	Contributor address; City; State; Zip C	
	514 Holly Crest, San Antonio, TX 78	8260
Principal occup	eation / Job title (See Instructions) Employer (S	See Instructions)

### SCHEDULE A1

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

ii tile reques	ited information is not applicable	e, DO NOT III	cidde tills page ill tile	report.
The	Instruction Guide explains how to	complete this	form.	1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch	idgey			3 Filer ID (Ethics Commission Filers)
4 Date	Full name of contributor out-of-state PAC (ID#:)      Victoria Collins Becker		7 Amount of contribution (\$)	
01/29/2024	6 Contributor address; 8524 Burnet Roa	city; ad, Austi	State; Zip Code n, TX 78757	250.00
8 Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Date	Full name of contributor Stacey Hunt	out-of-state PAC	(ID#:)	Amount of contribution (\$)
01/30/2024	Contributor address; 6378 Circle Oak Dri	ve, Bulve	State; Zip Code rde, TX 78163	100.00
Principal occup	ation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Penne Koepke		C (ID#:)	Amount of contribution (\$)
01/30/2024	Contributor address; 1507 Crescent Woods	<sub>City;</sub> s, San Ant	State; Zip Code	100.00
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruct	ions)
	ATTACH ADDITION If contributor is out-of-state PAC,		OF THIS SCHEDULE AS Nuction guide for additional r	

#### SCHEDULE A1

The	Instruction Cuide contains how to complete this form	1 Total pages Schedule A1:
2 FILER NAME	Instruction Guide explains how to complete this form.	3 Filer ID (Ethics Commission Filers)
Terri J. Ch	idgey	2 - 1.5 (2.1.50 05.1.1.1.0.5)
4 Date	5 Full name of contributor out-of-state PAC (ID#: Melizabeth Oakes	
02/01/2024		Zip Code 100.00
	239 Garden Hill, San Antonio, T	X 78260
8 Principal occu	pation / Job title (See Instructions)  9 Em	oloyer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
02/02/2024	Shawn Campbell	250.00
	Contributor address; City; State	<b>200.00</b>
	524 King William, San Antonio,	X 78204
Principal occup	ation / Job title (See Instructions) Em	oloyer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
02/02/2024	Beverley McClure	
<i>02,02,202</i> 1		Zip Code 250.00
	219 Branch Oak Way, San Antonio,	TX 78230
Principal occup	ation / Job title (See Instructions) Em	oloyer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	
02/02/2024	Peggy Collins	40000
02/02/2024	Contributor address; City; State	Zip Code 100.00
	622 Ogden Lane, San Antonio,	TX 78209
Principal occup	ation / Job title (See Instructions)	ployer (See Instructions)
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDIII E AS NEEDED

### SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch	iidgey	3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	5 Full name of contributor out-of-state PAC (ID#:)  Randy Gay	7 Amount of contribution (\$)
02/02/2024	6 Contributor address; City; State; Zip Code 418 Madison, San Antonio, TX 78204	250.00
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See Instruc	ctions)
Date	Full name of contributor out-of-state PAC (ID#:)  Jill Van Horn	Amount of contribution (\$)
02/02/2024	Contributor address; City; State; Zip Code  129 Davis Ct, San Antonio, TX 78209	200.00
Principal occup	ation / Job title (See Instructions)  Employer (See Instruc	ctions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
02/06/2024	Dennis Young  Contributor address; City; State; Zip Code  135 Cardinal Avenue, San Antonio, TX 78209	250.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instructions)	ctions)
Date	Full name of contributor out-of-state PAC (ID#:)  Alicia Thomas	Amount of contribution (\$)
02/06/2024	Contributor address; City; State; Zip Code  227 Bronson Ave, San Antonio, TX 78209	100.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instructions)	I ctions)

#### SCHEDULE A1

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The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch	iidgey	3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	5 Full name of contributor out-of-state PAC (ID#:)  Adam Bruggeman	7 Amount of contribution (\$)
02/07/2024	6 Contributor address; City; State; Zip Code 37 La Escalera, San Antonio, TX 78261	500.00
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See Instru	ctions)
Date	Full name of contributor out-of-state PAC (ID#:)  Kim Harle	Amount of contribution (\$)
02/07/2024	Contributor address; City; State; Zip Code  11522 Whisper Bluff Street, San Antonio, TX 78230	50.00
Principal occup	ation / Job title (See Instructions)  Employer (See Instruc	ctions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
02/10/2024	Henry Chidgey  Contributor address; City; State; Zip Code  1303 CR 118 B, Burnet, TX 78611	250.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instructions)	ctions)
Date	Full name of contributor out-of-state PAC (ID#:)  Kaylan Tanuku	Amount of contribution (\$)
02/12/2024	Contributor address; City; State; Zip Code  16902 Thomas Ridge Lane, Cypress, TX 77433	200.00
Principal occup	ration / Job title (See Instructions)  Employer (See Instru	ctions)

#### SCHEDULE A1

The	Instruction Guide explains how to complete this form	1 Total pages Scho	edule A1:
FILER NAME Terri J. Ch	idgey	3 Filer ID (Ethics	Commission Filers)
Date	5 Full name of contributor out-of-state PAC (ID#:_ Marr Ann Franzke		
2/13/2024	6 Contributor address; City; Sta 4001 N. New Braunfels 400a, San anton	e; Zip Code o, TX 78209	0.00
Principal occu	pation / Job title (See Instructions)  9 E	mployer (See Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:_	Amount of cont	ribution (\$)
2/13/2024	Nancy Guido  Contributor address; City; Sta  36 Courtside Circle, San Antonio		0.00
Principal occup	ation / Job title (See Instructions)	nployer (See Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:_	Amount of conf	ribution (\$)
2/13/2024	Patti Larsen  Contributor address; City; Sta  7415 Quail Run Dr, San Antonio	TX 78209	0.00
Principal occup	ation / Job title (See Instructions)	mployer (See Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:_	) Amount of conf	ribution (\$)
2/13/2024	Contributor address; City; Sta		0.00
Principal occup	ation / Job title (See Instructions)	mployer (See Instructions)	

### SCHEDULE A1

ii the reques	ted information is not applicable, DO NOT include this page	in the report.
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch	idgey	3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
02/13/2024	6 Contributor address; City; State; Zip Cod 22314 Roan Forest, San Antonio, TX 782	
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See	Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
02/13/2024	Contributor address; City; State; Zip Cod 2014 Whispering Water, Spring Branch, TX 78	<b>200.00</b>
Principal occup	ation / Job title (See Instructions)  Employer (See	Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	) Amount of contribution (\$)
02/13/2024	Charles Hinger & Jay Beatty  Contributor address; City; State; Zip Cod  17902 Westspring Drive, San Antonio, TX 782	<b>L</b> 00.00
Principal occupation / Job title (See Instructions)  Employer (See Instructions)		Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
02/13/2024	Contributor address; City; State; Zip Code 429 Bryn Mawr Dr, San Antonio, TX 782	Z30.00
Principal occup	pation / Job title (See Instructions)  Employer (See	Instructions)
	·	
	ATTACH ADDITIONAL COPIES OF THIS SCHEDUL	LE AS NEEDED

#### SCHEDULE A1

If the reques	ted information is not applicable, <b>DO NOT include this page in the</b>	report.
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch	idgey	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:)  Luci Wilson	7 Amount of contribution (\$)
02/15/2024	6 Contributor address; City; State; Zip Code 130 Magnolia Dr., San Antonio, TX 78212	100.00
8 Principal occu	pation / Job title (See Instructions)  9	tions)
Date	Full name of contributor out-of-state PAC (ID#:)  Sandi Wolff	Amount of contribution (\$)
02/15/2024	Contributor address; City; State; Zip Code 403 N. Palmetto, San Antonio, TX 78202	100.00
Principal occup	ation / Job title (See Instructions) Employer (See Instruct	ions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
02/15/2024	Carol Mendenhall  Contributor address; City; State; Zip Code  1 Villa Verde, San Antonio, TX 78230	100.00
Principal occup	eation / Job title (See Instructions)  Employer (See Instructions)	tions)
Date	Full name of contributor out-of-state PAC (ID#:)  Patrick Cunningham	Amount of contribution (\$)
02/16/2024	Contributor address; City; State; Zip Code	50.00
	1365 Bernal Ave., Burlingame, CA 94010	
Principal occup	eation / Job title (See Instructions) Employer (See Instructions)	ions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N	EEDED

### SCHEDULE A1

Th.	Instruction October contains from the containing the state of the form	1 Total pages Schedule A1:
2 FILER NAME	Instruction Guide explains how to complete this form.	3 Filer ID (Ethics Commission Filers)
Terri J. Ch	5 Full name of contributor out-of-state PAC (ID#:) Kal Hill	7 Amount of contribution (\$)
02/17/2024	6 Contributor address; City; State; Zip Code 7429 Northwest 105th St., Oklahoma City, OK 73162	200.00
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See Instruc	tions)
Date	Full name of contributor out-of-state PAC (ID#:)  Janine Sirotiak	Amount of contribution (\$)
02/18/2024	Contributor address; City; State; Zip Code 717 Contadora, San Antonio, Tx 78258	100.00
Principal occup	Dation / Job title (See Instructions)  Employer (See Instructions)	tions)
Date 02/18/2024	Full name of contributor out-of-state PAC (ID#:)  Shaun Sirotiak  Contributor address; City; State; Zip Code  717 Contadora, San Antonio, Tx 78258	Amount of contribution (\$)
Principal occu	pation / Job title (See Instructions)  Employer (See Instruc	tions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
02/18/2024	Emily Abdo  Contributor address; City; State; Zip Code  314 Vickery Blvd., Dallas, TX 75206	100.00
Principal occu	pation / Job title (See Instructions)  Employer (See Instructions)	tions)

#### SCHEDULE A1

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The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:	
<sup>2</sup> FILER NAME Terri J. Ch	idgey		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributor out-of-state PAC Mindy Waters	7 Amount of contribution (\$)		
02/19/2024	6 Contributor address; City;	State; Zip Code	150.00	
	1610 Sun Mountain, San Anto	onio, TX 78258		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)	
Date		(ID#:)	Amount of contribution (\$)	
02/19/2024			100 00	
	Contributor address; City; State; Zip Code		100.00	
	13531 Carlton Oaks, San Anto	·		
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ions)	
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)	
02/21/2024	Mary Koudelka		05.00	
02/21/2024	Contributor address; City;	State; Zip Code	25.00	
	21611 Bear Ridge, San Anto	nio, TX 78258		
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)	
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)	
02/21/2024	Linda McCarley	Oh-h- 7i- O-h-	$\Omega$	
	Contributor address; City;  3318 Rock Creek Run, San Anto	State; Zip Code	20.00	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)	
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

#### SCHEDULE A1

· 	sted information is not applicable, <b>DO NOT include this page in</b>	-
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch	iidgey	3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
02/21/2024	6 Contributor address; City; State; Zip Code	30.00
	31638 Catalina Way, Bulverde, TX 7816	3
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See Instructions)	structions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
02/21/2024	Roland Trevino	$\sim$
	Contributor address; City; State; Zip Code	200.00
	10 Inwood Mist, San Antonio, TX 7824	3
Principal occup	eation / Job title (See Instructions)  Employer (See Instructions)	tructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
02/22/2024	Wilbert Morgan	FO 00
02/22/2021	Contributor address; City; State; Zip Code	50.00
	19822 Lloyd's Park, Garden Ridge, TX 7826	6
Principal occup	eation / Job title (See Instructions)  Employer (See Instructions)	tructions)
Date	Full name of contributor out-of-state PAC (ID#:	) Amount of contribution (\$)
02/22/2024	Francis Heath	40000
02/22/2024	Contributor address; City; State; Zip Code	100.00
	2611 Eisenhauer, #302, San Antonio, TX 7820	
Principal occup	pation / Job title (See Instructions)  Employer (See Instructions)	tructions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE	AS NEEDED

### SCHEDULE A1

ii the reques	ted information is not applicable, <b>DO NOT Inclu</b>	de this page in the r	ероп.
The	Instruction Guide explains how to complete this for	rm.	1 Total pages Schedule A1:
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	Jane Jensen		7 Amount of contribution (\$)
02/22/2024	6 Contributor address; City; Start 17311 Fountain View Dr.	78248	150.00
8 Principal occu	pation / Job title (See Instructions)  9	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of contribution (\$)
02/22/2024		State; Zip Code	150.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (ID#	<b>#</b> :)	Amount of contribution (\$)
02/22/2024	Terri Nueman  Contributor address; City; S  2003 Shadow Cliff St., San Anton	State; Zip Code	25.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of contribution (\$)
02/22/2024		State; Zip Code	100.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
	, <u>, , , , , , , , , , , , , , , , , , </u>		
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS N	EEDED

### SCHEDULE A1

ii the reques	sted information is not applicable, DO NOT include this page in the	•
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	Full name of contributor out-of-state PAC (ID#:)  Gloria Canada	7 Amount of contribution (\$)
02/22/2024	6 Contributor address; City; State; Zip Code 205 Rosemary Ave., San Antonio, TX 78209	50.00
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See Instructions)	tions)
Date	Full name of contributor out-of-state PAC (ID#:)  Ruth Wayne	Amount of contribution (\$)
02/22/2024	Contributor address; City; State; Zip Code  225 Dry Hollow, Spring Branch, TX 78070	50.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instructions)	ions)
Date	Full name of contributor out-of-state PAC (ID#:)  Janet Vielma	Amount of contribution (\$)
02/22/2024	Contributor address; City; State; Zip Code 701 Candleglo, Windcrest, TX 78239	100.00
Principal occup	Dation / Job title (See Instructions)  Employer (See Instructions)	tions)
Date	Full name of contributor out-of-state PAC (ID#:)  Veronica Ortegon	Amount of contribution (\$)
02/22/2024	Contributor address; City; State; Zip Code  1147 Crystal, San Antonio, TX 78211	25.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instructions)	tions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N	EEDED

#### SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME Terri J. Ch	nidgey	3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	5 Full name of contributor out-of-state PAC (ID#:) Eileen Brzozowski	7 Amount of contribution (\$)
02/22/2024	6 Contributor address; City; State; Zip Code 13006 Heathers Elm, Saint Hedwig, TX 78152	25.00
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See Instruc	tions)
Date	Full name of contributor out-of-state PAC (ID#:)  Barbara Johns	Amount of contribution (\$)
02/22/2024	Contributor address; City; State; Zip Code  201 Hermine Blvd., San Antonio, TX 78212	50.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instruc	tions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
02/23/2024	Kari Thurman  Contributor address;  City;  State;  Zip Code  222 Garden Hill, San Antonio, TX 78260	100.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instructions)	tions)
Date	Full name of contributor out-of-state PAC (ID#:)  Thomas Coffey	Amount of contribution (\$)
02/24/2024	Contributor address; City; State; Zip Code  266 Adeline Lane, Bulverde, TX 78163	100.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instructions)	tions)
	I .	

#### SCHEDULE A1

If the reques	ted information is not applicable, <b>DO NOT include this page in the</b>	report.
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch	idgey	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:)  Cynthia Mentor	7 Amount of contribution (\$)
02/26/2024	6 Contributor address; City; State; Zip Code 19116 Trailview, San Antonio, TX 78258	50.00
8 Principal occu	pation / Job title (See Instructions)  9	tions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
02/26/2024	Contributor address; City; State; Zip Code  213 Lone Tree, Boerne, TX 78006	100.00
Principal occup	ation / Job title (See Instructions)  Employer (See Instructions)	ions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
02/26/2024	Kelly Lepeska  Contributor address; City; State; Zip Code  1502 Wild Peak, San Antonio, TX 78258	50.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instructions)	tions)
Date	Full name of contributor out-of-state PAC (ID#:)  Kevin Geary	Amount of contribution (\$)
02/27/2024	Contributor address; City; State; Zip Code  16107 La Madera Rio, Helotes, TX 78023	100.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instructions)	tions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N	EEDED

#### SCHEDULE A1

If the reques	ted information is not applicable, <b>DO NOT include</b>	e this page in the r	eport.
The	Instruction Guide explains how to complete this form		1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch	idgey		3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	5 Full name of contributor out-of-state PAC (ID#:)  Gretchen Thomas		7 Amount of contribution (\$)
02/27/2024	6 Contributor address; City; Sta 912 Midnight Drive, San Antonio	te; Zip Code	100.00
8 Principal occu		Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of contribution (\$)
02/27/2024		78006	50.00
Principal occup		imployer (See Instruction	ons)
Date Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of contribution (\$)
02/28/2024	Contributor address; City; Sta 19715 Messina, San Antonio,		500.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of contribution (\$)
02/28/2024	Kathleen O"Shea  Contributor address; City; Sta  18731 Corsini Dr., San Antonio	te; Zip Code <b>TX 78258</b>	1,000.00
Principal occup		Employer (See Instruction	ons)
	ATTACH ADDITIONAL COPIES OF TH If contributor is out-of-state PAC, please see Instruction		

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#### SCHEDULE A1

if the reques	ted information is not applicable, <b>DO NOT incl</b> u	ide this page in the re	eport.
The	Instruction Guide explains how to complete this fo	rm.	1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch	idgey		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:) Rebecca Sweer		7 Amount of contribution (\$)
03/02/2024	6 Contributor address; City; 1402 Grey Oak Dr., San Anton	State; Zip Code	20.00
8 Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (ID	#:)	Amount of contribution (\$)
03/02/2024	Mary Jean Stolhandske  Contributor address; City;  16219 San Dominique, San Anton	State; Zip Code	100.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (ID	#:)	Amount of contribution (\$)
03/03/2024	Lynn Limerick  Contributor address; City;  16527 Twin Fox, San Antonio	State; Zip Code D, TX 78247	25.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (ID	#:)	Amount of contribution (\$)
03/03/2024		State; Zip Code  TX 78260	100.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)

#### SCHEDULE A1

II the reques	ted information is not applicable, <b>DO NOT inc</b>	Jude this page in the r	
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch	idgey		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:)  Mary Ellen Glaze		7 Amount of contribution (\$)
03/04/2024	6 Contributor address; City; 32 Shady Trail Street, San Anto	State; Zip Code	100.00
8 Principal occu		9 Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of contribution (\$)
03/04/2024	Melizabeth Oakes  Contributor address; City;	State; Zip Code	100.00
	239 Garden Hill, San Anton	io, TX 78260	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date		(ID#:)	Amount of contribution (\$)
03/06/2024	Trisha Garza  Contributor address; City;  21502 Pointer Court, San Anto	State; Zip Code	50.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC  Steve Peirce	(ID#:)	Amount of contribution (\$)
03/10/2024	Contributor address; City;	State; Zip Code	250.00
Principal occup	1006 Lightstone Drive. San Anto	Employer (See Instruction	ons)

#### SCHEDULE A1

The	Instruction Guide explains how to complete this form	. 1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch		3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	5 Full name of contributor out-of-state PAC (ID#:_	
03/10/2024	6 Contributor address; City; Sta 10 Trophy Ridge, San Antonio	TX 78258 100.00
8 Principal occu		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:_	Amount of contribution (\$)
03/10/2024		ate; Zip Code 50.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)
Date		Amount of contribution (\$)
03/10/2024	Jill Wiiliamson  Contributor address; City; Sta  8 Remington Way, San Antonio	te; Zip Code
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#:_	
03/10/2024		1te; Zip Code , TX 78258
Principal occup		Employer (See Instructions)

#### SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
FILER NAME Terri J. Ch	idgey	3 Filer ID (Ethics Commission Filers)
Date	5 Full name of contributor out-of-state PAC (ID#:	<b>7</b> Amount of contribution (\$)
3/10/2024	6 Contributor address; City; State; Zip Co 5 Remington Way, San Antonio, TX 78	
Principal occu		e Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
3/16/2024	Suzanne Blaylock  Contributor address; City; State; Zip Co  19410 Easy Oak, San Antonio, TX 78	
Principal occup	ation / Job title (See Instructions) Employer (Se	e Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
3/17/2024	Mayra Martinez  Contributor address; City; State; Zip Co.  1314 Arrow Spring, San Antonio, TX 78	100.00
Principal occup	ation / Job title (See Instructions) Employer (Se	e Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	) Amount of contribution (\$)
3/18/2024	Contributor address; City; State; Zip Coor  220 Majestic Grove, San Antonio, TX 78	
Principal occup		e Instructions)
	j	

#### SCHEDULE A1

ii the reques	ted information is not applicable, DO NOT include this page in the	•
The	Instruction Guide explains how to complete this form.	<b>1</b> Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch	idgey	3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	5 Full name of contributor out-of-state PAC (ID#:)  Kendall Schrader	7 Amount of contribution (\$)
03/19/2024	6 Contributor address; City; State; Zip Code 609 Contadora, San Antonio, TX 78258	500.00
8 Principal occu	pation / Job title (See Instructions)  9	tions)
Date	Full name of contributor out-of-state PAC (ID#:)  Patricia Moss	Amount of contribution (\$)
03/20/2024	Contributor address; City; State; Zip Code  130 Garden Trace, San Antonio, TX 78260	100.00
Principal occup	ation / Job title (See Instructions)  Employer (See Instructions)	tions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
03/20/2024	Joanne MacMillan  Contributor address; City; State; Zip Code  247 Garden Hill, San Antonio, TX 78260	100.00
Principal occup	ration / Job title (See Instructions)  Employer (See Instructions)	tions)
Date	Full name of contributor out-of-state PAC (ID#:)  Frances Coker	Amount of contribution (\$)
03/20/2024	Contributor address; City; State; Zip Code  227 Garden Hill, San Antonio, TX 78260	100.00
Principal occup	ration / Job title (See Instructions)  Employer (See Instructions)	tions)

#### SCHEDULE A1

If the reques	ted information is not applicable, <b>DO NOT include this page ir</b>	the report.
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch	idgey	3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
03/20/2024	6 Contributor address; City; State; Zip Code	100.00
	94 Sable Heights, San Antonio, TX 7825	58
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See I	nstructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
03/21/2024	Contributor address; City; State; Zip Code	250.00
	129 Davis Ct, San Antonio, TX 7820	
Principal occup	ation / Job title (See Instructions) Employer (See Instructions)	nstructions)
Date	Full name of contributor out-of-state PAC (ID#:	) Amount of contribution (\$)
03/21/2024	Steven Lehtinen	100 00
00,21,2021	Contributor address; City; State; Zip Code 1310 Arrow Spring, San Antonio, TX 7825	100.00
Principal occup	ration / Job title (See Instructions)  Employer (See I	
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
03/21/2024	Michelle Asher	<b>EO OO</b>
	Contributor address; City; State; Zip Code 9013 Fox Briar, Boerne, TX 7800	50.00
Principal occup	eation / Job title (See Instructions)  Employer (See I	

#### SCHEDULE A1

II the reques	ted information is not applicable, <b>DO NOT include this page</b>	in the report.
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch	idgey	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC (ID#:	
03/21/2024	6 Contributor address; City; State; Zip Coo. 24807 Birdie Ridge, San Antonio, TX 782	
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See	e Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
03/21/2024	Contributor address; City; State; Zip Coordinates City; State; Zip Coordin	1 0.00
Principal occup	ation / Job title (See Instructions) Employer (See	e Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
03/21/2024	Lisa Guerrero  Contributor address; City; State; Zip Coc  19906 Messina, San Antonio, TX 782	1,000.00
Principal occup	pation / Job title (See Instructions)  Employer (See	e Instructions)
Date	Full name of contributor out-of-state PAC (ID#:	Amount of contribution (\$)
03/22/2024	Contributor address; City; State; Zip Cod  24823 Night Arrow, San Antonio, TX 78	<b>25.00</b>
Principal occup	pation / Job title (See Instructions)  Employer (See	e Instructions)

#### SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch	nidgey	3 Filer ID (Ethics Commission Filers)
<b>4</b> Date	5 Full name of contributor out-of-state PAC (ID#:)  Laura Newberger	7 Amount of contribution (\$)
03/22/2024	6 Contributor address; City; State; Zip Code 17134 Ashbury Lodge, San Antonio, TX 78247	50.00
8 Principal occu	pation / Job title (See Instructions)  9 Employer (See Instru	actions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
03/23/2024	Contributor address; City; State; Zip Code	100.00
Principal occup	3185 Morning Crk, San Antonio, TX 78247  Pation / Job title (See Instructions)  Employer (See Instru	octions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
03/24/2024	Thomas Galvin  Contributor address; City; State; Zip Code  409 Texas Point, San Antonio, TX 78260	300.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instru	uctions)
Date	Full name of contributor out-of-state PAC (ID#:)  Mary Karstens	Amount of contribution (\$)
03/24/2024	Contributor address; City; State; Zip Code  932 Pinon Blvd., San Antonio, TX 78260	50.00
Principal occup	pation / Job title (See Instructions)  Employer (See Instru	actions)

#### SCHEDULE A1

If the reques	ted information is not applicable, <b>DO NOT</b>	include this page in the	report.
The	Instruction Guide explains how to complete th	nis form.	1 Total pages Schedule A1:
<sup>2</sup> FILER NAME Terri J. Ch	iidgey		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state F Robin Karstens	PAC (ID#:)	7 Amount of contribution (\$)
03/24/2024	6 Contributor address; City; 932 Pinon Blvd., San Anto	State; Zip Code	250.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of contribution (\$)
03/25/2024	Contributor address; City; 512 Sagecrest Drive, San An	State; Zip Code	500.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date		PAC (ID#:)	Amount of contribution (\$)
03/25/2024	Diane Mathews  Contributor address; City;  241 W. Oak Estates Dr., San A	State; Zip Code	75.00
Principal occup	vation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	ions)
	ATTACH ADDITIONAL COPIE		

### NON-MONETARY (IN-KIND) POLITICAL **CONTRIBUTIONS**

#### SCHEDULE A2

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

Th	ne Instruction Guide explains how to complete this form	n.		1 Total pages Sched	ule A2:
Terri J. (				3 Filer ID (Ethics Co	ommission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTION	NS	\$ 1,561.5	54
5 Date	6 Full name of contributor		)	8 Amount of Contribution \$	9 In-kind contribution description
	7 Contributor address; City; State;	Zip Code	9	Check if travel outsi	      de of Texas. Complete Schedule T.
<b>10</b> Principal occ	upation / Job title (FOR NON-JUDICIAL)(See Instructions)	<b>11</b> Em	nploye	r (FOR NON-JUDICI	AL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	<b>13</b> Co	ntribu	tor's job title (FOR JU	IDICIAL)(See Instructions)
<b>14</b> Contributor's	employer/law firm (FOR JUDICIAL)	<b>15</b> Lav	w firm	of contributor's spou	se (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor		)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State;	Zip Cod	le	Check if travel outsi	 
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Em	nploye	r (FOR NON-JUDICI	AL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Со	ntribu	tor's job title (FOR JL	IDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Lav	w firm	of contributor's spou	se (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

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

If the requested	l information is not applicable, <b>DO N</b>	OT include this page in the re	port.
The	Instruction Guide explains how to com	plete this form.	Total pages Schedule E:  1
<sup>2</sup> FILER NAME  Terri J. Chic	lgey		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UN	IITEMIZED LOANS		\$
5 Date of loan 01/10/2024	7 Name of lender □ out-of-state Terri J. Chidgey	e PAC (ID#:)	9 Loan Amount (\$) 2,000.00
6 Is lender a financial Institution?	8 Lender address; City; 24710 Garden Way, San Anto	State; Zip Code Onio, TX 78260	10 Interest rate 0.00  11 Maturity date
12 Principal occupation	on / Job title (See Instructions)	13 Employer (See Instructions)	,
14 Description of Coll  none	ateral	Check if personal fundaccount (See Instruct	ds were deposited into political ions)
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)
■ not applicable	<b>18</b> Guarantor address; City;	State; Zip Code	
20 Principal Occupat	ion (See Instructions)	21 Employer (See Instructions)	
Date of loan	Name of lender	te PAC (ID#:)	Loan Amount (\$)
ls lender a financial Institution?	Lender address; City;	State; Zip Code	Interest rate
Y N			Maturity date
Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)	
Description of Colla	ateral	Check if personal fundaccount (See Instruct	ds were deposited into political ions)
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)
not applicable	Guarantor address; City;	State; Zip Code	
	on (See Instructions)	Employer (See Instructions)	
	ATTACH ADDITIONAL CO	PIES OF THIS SCHEDULE AS NET	

## POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By

Event Expense Food/Beverage Expense
Gifl/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Prin ing Expense

Solicita ion/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)	
7	Terri J. Chidgey			
Date 01/18/2024	Norton Lewis Printing			
Amount (\$)	7 Payee address;	City;	State; Zip Code	
1,194.00	12106 Valliant, San Antonio, TX 782	96.200		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description signage, rack	cards, business cards	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
01/24/2024	Norton Lewis Printing			
Amount (\$)	Payee address;	City;	State; Zip Code	
95.79	12106 Valliant, San Antonio, TX 782	16		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expense	rack cards		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
01/31/2024	FROST Bank			
Amount (\$)	Payee address;	City;	State; Zip Code	
34.15	21011 U.S. Highway 281 North, San	Antonio, TX 78	258	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Accounting/Banking	Order Checks		
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	

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## POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Poli ical Committee

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Event Expense Food/Beverage Expense
Gifl/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Prin ing Expense Salaries/Wages/Contract Labor

Solicila ion/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District
Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	- John S. C. College	A STATE OF THE STA	
1 Total pages Schedule F1:	2 FILER NAME Terri J. Chidgey		3 Filer ID (Ethics	Commission Filers)	
4 Date 02/06/2024	5 Payee name Norton Lewis Printing				
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code	
422.18	12106 Valliant, San Antonio, TX 782	16			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense	(b) Description magnets			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aus	tin, TX, officeholder living	expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held	
Date	Payee name				
02/09/2024	M5X Designs LLC				
Amount (\$)	Payee address:	City;	State;	Zip Code	
807.56	503 Hillside Court, San Antonio, TX	78258			
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Advertising Expense	t-shirts			
	Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held	
Date	Payee name				
02/11/2024	UPRINT				
Amount (\$)	Payee address;	City;	State;	Zip Code	
104.27	8000 Haskell Ave., Van Nuys CA 914	106			
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Advertising Expense	stickers			
	Check if travel outside of Texas Complete Schedule T.	Check if Aus	tin, TX, officeholder living	expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held	
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Poli ical Committee

Event Expense Fees Food/Beverage Expense Grift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Prin ing Expense Salaries/Wages/Contract Labor Solicila ion/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a calegory not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	100	
1 Total pages Schedule F1:	2 FILER NAME Terri J. Chidgey		3 Filer ID (Ethics Commission Filers)	
4 Date 02/13/2024	5 Payee name Norton Lewis Printing			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
120.83	12106 Valliant, San Antonio, TX 78216			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Thank You cards & envelopes		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name H	Office sought		Office held
Date	Payee name			
02/15/2024	Amazon			
Amount (\$)	Payee address;	City;	State;	Zip Code
35.90	410 Terry Ave N, Seattle 98109, WA			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Event Expenses Name Badges Stickers			
	Check if travel outside of Texas, Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
02/20/2024	United States Post Office			
Amount (\$)	Payee address;	City;	State;	Zip Code
68.00	20403 Encino Ledge, San Antonio, TX 78259			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description		
	Solicitation/Fundraising Expense	Postage stamp	ps	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Poli ical Committee

Event Expense
Fees
Foot/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Prin ing Expense Salaries/Wanes/Contract Labor Solicila ion/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Total pages Schedule F1:	2 FILER NAME Terri J. Chidgey		3 Filer ID (Ethics Commission Filers)		
Date	5 Payee name				
02/21/2024	Amazon				
Amount (\$)	7 Payee address;	City;	State; Zip Code		
372.02	410 Terry Ave N, Seattle 98109, WA				
3	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF EXPENDITURE	Printing Expense	Cyan, magenta, black Ink Toner			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
02/21/2024	Amazon				
Amount (\$)	Payee address;	City;	State; Zip Code		
126.53	410 Terry Ave N, Seattle 98109, WA				
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Printing Expense	Yellow Ink To	oner		
	Check if travel outside of Texas, Complete Schedule T.	Check if Aus	tin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
02/23/2024	Frost Bank				
Amount (\$)	Payee address;	City;	State; Zip Code		
50.00	21011 U.S. Highway 281 North, San	Antonio, TX 78	3258		
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Accounting/Banking	Duplicate Item	n Debit		
	Check if travel outside of Texas. Complete Schedule T.	Check if Aus	tin, TX, officeholder living expense		

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## POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Poli ical Committee

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Event Expense Food/Beverage Expense
Gifl/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Prin ing Expense Salaries/Wages/Contract Labor

Solicila ion/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District
Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to o	complete this form.		
1 Total pages Schedule F1:	2 FILER NAME Terri J. Chidgey		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Payee name			
03/05/2024	Amazon			
Amount (\$)	7 Payee address;	City;	State; Zip Code	
9.73	410 Terry Ave N, Seattle 98109, WA			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
	Printing Expense	4x6 card stoc	k	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aus	tin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
03/08/2024	M5X Designs LLC			
Amount (\$)	Payee address;	City	State; Zip Code	
389.70	503 Hillside Court, San Antonio, TX 78258			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description		
	Advertising Expense	t-shirts		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
03/11/2024	Constant Contact			
Amount (\$)	Payee address;	City;	State; Zip Code	
12.79	1601 Trapelo Road, Waltham, MA 02	2451		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description		
	Advertising Expense Email Advertising Service			
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Poli ical Committee

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Event Expense Fees Food/Beverage Expense Grift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Prin ing Expense Salaries/Wages/Contract Labor Solicila ion/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a calegory not listed above)

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Total pages Schedule F1:	Z FILER NAME Terri J. Chidgey		3 Filer ID (Ethics Commission Filers)	
4 Date 03/13/2024	5 Payee name Norton Lewis Printing			
6 Amount (\$)	7 Payee address;	City;	State; Zip Code	
1,218.35	12106 Valliant, San Antonio, TX 78216			
t -	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Advertising Expense	rack cards, magnets, signage		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aus	tin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held	
Date	Payee name			
03/13/2024	Barbera Production, LLC			
Amount (\$)	Payee address;	City;	State; Zip Code	
900.00	20079 Stone Oak Parkway, Suite 11	05-195, San Ar	ntonio, TX 78258	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expense Neighborhood News Paper Advertising			
	Check if travel outside of Texas, Complete Schedule T.	Check if Austin, TX, officeholder living expense		
	Candidate / Officeholder name	Office sought	Office held	
Complete ONLY if direct expenditure to benefit C/Ol			Since Hold	
			Onide risia	
expenditure to benefit C/OI	H		O. III O.	
expenditure to benefit C/Ol  Date	Payee name	City;	State; Zip Code	
Date 03/15/2024	Payee name Amazon			
Date 03/15/2024 Amount (\$)	Payee name  Amazon  Payee address;			
Date 03/15/2024 Amount (\$)	Payee name Amazon Payee address: 410 Terry Ave N, Seattle 98109, WA	City;	State; Zip Code	
Date 03/15/2024 Amount (\$) 14.70	Payee name Amazon Payee address: 410 Terry Ave N, Seattle 98109, WA Category (See Categories listed at the top of this schedule)	City;  Description  4x6 card stock	State; Zip Code	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Poli ical Committee

Event Expense Fees Food/Beverage Expense Gifl/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Prin ing Expense Salaries/Wages/Contract Labor Solicita ion/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

3,1111	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1:	1: 2 FILER NAME Terri J. Chidgey  3 Filer ID (Ethics Commis		s Commission Filers)	
4 Date	5 Payee name		30	
03/19/2024	Norton Lewis Printing			
6 Amount (\$) 703.63	7 Payee address: City; State; Zip Code 12106 Valliant, San Antonio, TX 78216			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Advertising Expense	signage		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aus	stin, TX, officeholder livin	g expense
9 Complete ONLY 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		
	Check if travel outside of Texas, Complete Schedule T.	Check if Aus	etin, TX, officeholder livin	g expense
Complete ONLY 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		
	Check if Iravel outside of Texas. Complete Schedule T	Check if Aus	tin, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
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