CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) The C/OH Instruction Guide explains how to complete this form. 2 Total pages filed: MS / MRS / MR 3 CANDIDATE / FIRST MI **OFFICEHOLDER** OFFICE USE ONLY MRS. **ANGELA** C NAME Date Received NICKNAME LAST SUFFIX ANGIE WIERZBICKI 4 CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY: ZIP CODE 2311 CREEK MEADOWS DRIVE, MISSOURI CITY, **OFFICEHOLDER** MAILING TX 77459 **ADDRESS** Change of Address 5 CANDIDATE/ AREA CODE PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (832)274-9246 PHONE Receipt # 6 CAMPAIGN Amount \$ MS / MRS / MR FIRST MI TREASURER **MOHAMMAD** NAME Date Processed NICKNAME SUFFIX **JAZZ** Date Imaged **AIJAZ** CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE # CITY: ZIP CODE **TREASURER** 12323 ASHFORD HOLLOW DRIVE, SUGAR LAND, TX 77478 **ADDRESS** (Residence or Business) 8 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION TREASURER PHONE (281 235-5842 9 REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only) July 15 8th day before election **Exceeded Modified** Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Month Day Year Day Year COVERED 1 1 25 3 31 25 THROUGH 11 ELECTION ELECTION DATE **ELECTION TYPE** Primary Day Other Year Description 3 25 General Special 12 OFFICE OFFICE HELD (if any) 13 OFFICE SOUGHT (if known) FORT BEND ISD POSITION 7 14 NOTICE FROM 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 OFFICEHOLDER'S REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. POLITICAL COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

ANGELA WIERZBIC	KI	16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 18184.70
EXPENDITURE TOTALS	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	s 10552.26
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	DAY \$ 3015.14
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T LAST DAY OF THE REPORTING PERIOD	
18 SIGNATURE I s	wear, or affirm, under penalty of perjury, that the accompanying report is true a	and correct and includes all informati
rec	uired to be reported by me under Title 15, Election Code.	and correct and includes all information
	Signature of Cand	lidate or Officeholder
	Please complete either option below:	
(1) Affidavit		
NOTARY STAMP/SEAL		
Sworn to and subscribed b	pefore me by this the	day of
20, to certify w	hich, witness my hand and seal of office.	
Signature of officer administeri	ng oath Printed name of officer administering oath	Title of officer administering oath
OF REPERPENDENCE	er transport from the state of	SAME PARTY OF THE
2) Unsworn Declaration	n	,
My name isMy address is	ela Wierzhold, and my date of birth is	9/20/77
	(street)	- 1459 (1874
executed in For Cov	County, State of, on the day of	(zip code) (country)
	, of the(month)	(year)
	Signatural of Condidate	Office Add (Declary)
	Signature of Candidate/	Unicertoider (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	FILER NAME IGELA WIERZBICKI 20 Filer ID (Ethics Con	nmiss	ion Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1,	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	12652.12
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	5532.58
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	SCHEDULE E: LOANS	\$	
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		10552.26
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		

The	Instruction Guide explains how to comple	te this form.	1 Total pages Schedule A1: 25
ANGELA V	/IERZBICKI		3 Filer ID (Ethics Commission Filers
Date 01/06/2025	5 Full name of contributor CHARLES SANDERS 6 Contributor address; City; State; Zip Code 5614 DAIRYBROOK COVE, SUGAR LAND, TX 77479		7 Amount of contribution (\$) 104.42
Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	ttions)
Date 1/09/2025	Full name of contributor out-of-str ESTHER DELPOLYI Contributor address; City; 319 LONGVIEW DRIVE, SUGA	State; Zip Code	Amount of contribution (\$) 52.37
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct SELF EMPLOYED	ions)
Date 1/10/2025	Full name of contributor put-of-star ZAHRA SYED Contributor address; City; 11202 RATTRAYCOURT, RICI	State; Zip Code HMOND, TX 77407	Amount of contribution (\$) 260.59
Principal occupa	ation / Job title (See Instructions)	Employer (See Instructi	
Date 1/13/2025	Full name of contributor out-of-state TOM NICHOLS Contributor address; City; 3318 DEERWOOD LANE, MISSO	State; Zip Code	Amount of contribution (\$) 520.87
	tion / Job title (See Instructions) PETROLEUM BROKER	Employer (See Instruction MAKET PETROLEUM	
		ES OF THIS SCHEDULE AS NE	

SCHEDULE A1

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

Tì	e Instruction Guide explains how to complete	this form.	1 Total pages Schedule A1: 76
2 FILER NAM ANGELA	WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date 01/15/2025	Fatima Wajahat 6 Contributor address; City: 5817 Valley Forge Dr, Houston	State; Zip Code	7 Amount of contribution (\$)
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instruct HARRIS COUNTY	tions)
Date 01/15/2025	Scott Pett Contributor address; City: 3907 Flintrock Lane, Sugar La	State; Zip Code	Amount of contribution (S) 52.37
Principal occu WRITER/ED	pation / Job title (See Instructions)	Employer (See Instruction RICE UNIVERSITY	ons)
Date 01/16/2025	Kara Cook	State: Zip Code	Amount of contribution (\$) 104.42
	Deation / Job title (See Instructions) DF INNOVATION	Employer (See Instruction HARRIS COUNTY P	
Date 01/16/2025	Full name of contributor out-of-state Par Eliz Markowitz Contributor address: City: 24111 Haywards Crossing Ln,	State: Zip Code Katy, TX 77494	Amount of contribution (\$) 104.42
Principal occup DUCATOR	ation / Job title (See Instructions)	Employer (See Instruction U OF H	ons)
	ATTACH ADDITIONAL COPIES If contributor is out-of-state PAC, please see Instr	OF THIS SCHEDULE AS NEI	EDED

SCHEDULE A1

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

	this form.	1 Total pages Schedule A1: 7 6
WIERZBICKI		3 Filer ID (Ethics Commission Filers)
John Strader 6 Contributor address; City; 7443 Colony Bend Ln, Missouri Cit	State; Zip Code	7 Amount of contribution (\$)
etion / Job title (See Instructions)	9 Employer (See Instruct HORIZON BAPTIS	
Amanda Walker Contributor address; City;	State: Zip Code	Amount of contribution (S) 104.42
tion / Job title (See Instructions)	Employer (See Instructi SIENNA CONSULT	
Kristen Bray Contributor address; City;	State; Zip Code	Amount of contribution (\$) 52.37
tion / Job title (See Instructions)	Employer (See Instructi	ons)
Barbara Zack Contributor address; City.	State; Zip Code	Amount of contribution (\$)
ion / Job title (See Instructions)	Employer (See Instruction	ons)
	John Strader 6 Contributor address; City; 7443 Colony Bend Ln, Missouri Ci Pation / Job title (See Instructions) Full name of contributor Amanda Walker Contributor address; City; 9607 Tall Tree Court, Missouri tion / Job title (See Instructions) Full name of contributor Full name of contributor Kristen Bray Contributor address; City; 10607 Saratoga Square, Missouri (tion / Job title (See Instructions) Full name of contributor City; 10607 Saratoga Square, Missouri (tion / Job title (See Instructions) Full name of contributor Dut-of-state R Barbara Zack Contributor address; City;	John Strader 6 Contributor address: City: State: Zip Code 7443 Colony Bend Ln, Missouri City, TX 77459 Sation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Amanda Walker Contributor address: City: State: Zip Code 9607 Tall Tree Court, Missouri City, TX 77459 Ition / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Full name of contributor Kristen Bray Contributor address: City: State: Zip Code 10607 Saratoga Square, Missouri City, TX 77459 Ition / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Full name of contributor Out-of-state PAC (IDst) State: Zip Code 2802 Creekway Circle, Missouri City, TX 77459

The	Instruction Guide explains how to complete the	nis form.	1 Total pages Schedule A1: 25
2 FILER NAME ANGELA	WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date 01/19/2025	5 Full name of contributor out-of-state PAC (ID#		7 Amount of contribution (\$) 104.42
8 Principal occu DIRECTOR	pation / Job title (See Instructions)	9 Employer (See Instruction BAKER HUGHES	Itions)
Date	Full name of contributor cut-of-state B	AC (ID#:)	Amount of contribution (\$)
01/20/2025	Contributor address: City: 4002 Alexis Tate Circle, Missouri C	State: Zip Code ity, TX 77459	1,000.00
Principal occup RETIRED	pation / Job title (See Instructions)	Employer (See Instruc	tions)
Date 01/22/2025	Full name of contributor out-of-state PA Amy Robinson	AC (IDW:)	Amount of contribution (\$)
7172272023	Contributor address; City; 2906 Del Monte Court, Missouri City	State; Zip Code y, TX 77459	100.00
Principal occup	ection / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor out-of-state PA	C (ID#)	Amount of contribution (\$)
01/22/2025	Contributor address: City: 4014 Eastshore Street, Missouri Cit	State: Zip Code	102.62
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)

The	Instruction Guide explains how to complete t	this form.	1 Total pages Schedule A1: 25
ANGELA	WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date 01/22/2025	Full name of contributor out-of-state Meghan Koka Contributor address; City; 4307 Roundtree Lane, Missouri Ci	State; Zip Code ty, TX 77459	7 Amount of contribution (\$) 21.13
Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date 11/22/2025	Full name of contributor out-of-state Joanna Ouderkirk Contributor address: City: 1727 Shoreline Drive, Missou	State: Zip Code	Amount of contribution (\$) 104.42
Principal occup EAL ESTAT	ation / Job title (See Instructions)	Employer (See Instruction SELF EMPLOYED	ons)
Date 1/23/2025	Full name of contributor out-of-state F Carolyn Hopkins Contributor address; City; 3606 Golden Tee Lane, Missouri C	State; Zip Code	Amount of contribution (\$) 104.42
Principal occup ETIRED	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 1/23/2025	Full name of contributor cut-of-state P Barbara Beskin Contributor address: City; 2934 Colony Drive, Sugar Lar	State: Zip Code	Amount of contribution (S) 52.37
Principal occup UMAN RES	ation / Job title (See Instructions) OURCES	Employer (See Instruction WHOLE FOODS MA	The state of the s

SCHEDULE A1

Th	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 7
2 FILER NAME ANGELA	WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC Nancy Schoepf	(ID#)	7 Amount of contribution (S)
01/24/2025	6 Contributor address: City; 4019 Bay Shore Drive, Missouri City,	State; Zip Code TX 77459	100.00
8 Principal occi RETIRED	pation / Job title (See Instructions)	9 Employer (See Instruction	ons)
Date	Full name of contributor Dut-of-state PAC Grady Prestage Campaign	(ID#)	Amount of contribution (\$)
01/25/2025	Contributor address; City: P.O. Box 535, Missouri City, TX	State; Zip Code 77459	1,000.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 01/26/2025	Full name of contributor out-of-state PAC (Ronald Reynolds Contributor address; City; 6140 Highway 6 South #233, Missour	State, Zip Code	Amount of contribution (S)
	pation / Job title (See Instructions) RESENTATIVE	Employer (See Instruction	
Date 04/20/2005	Full name of contributor out-of-state PAC () D#:	Amount of contribution (\$)
01/26/2025	Contributor address; City. 5838 Banyan Oak Court, Richmond,	State: Zip Code	20.00
Principal occup HOUSTON C	ation / Job title (See Instructions) PRGANIZER P	Employer (See Instruction	ns)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

The Instruction Guide explains how to complete this form. 2 FILER NAME ANGELA WIERZBICKI			1 Total pages Schedule A1:
			3 Filer ID (Ethics Commission Filers)
4 Date 01/26/2025	5 Full name of contributor Saba Umar 6 Contributor address: City: 17407 Woodfalls Lane, Richn	State; Zip Code	7 Amount of contribution (\$)
8 Principal occ CASE MANA	upation / Job title (See Instructions)	9 Employer (See Instruction FORT BEND COU	_ 1
Date 01/26/2025	Full name of contributor Vicki Coffman Contributor address: City: 802 Sycamore Road, Richmo	State; Zip Code	Amount of contribution (S) 208.54
Principal occup RETIRED	pation / Job title (See Instructions)	Employer (See Instruct	tions)
Date 01/26/2025	Full name of contributor out-of-state F Muzaffar Vohra Contributor address; City: 13108 Sunset Cliff Ct, Sugar L	State: Zip Code	Amount of contribution (\$) 104.42
Principal occup	nation / Job title (See Instructions)	Employer (See Instruct	
Date 01/26/2025	Lakshmi Ramakrishnan Contributor address; City; 619 Arden Oaks Dr., Sugar La	State; Zip Code	Amount of contribution (\$)
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction TEXAS RIO GRAND	
		OF THIS SCHEDULE AS NE	

SCHEDULE A1

If the requested information is not applicable, DO NOT include this

ANGELA			
4 Date	WIERZBICKI		3 Filer ID (Ethics Commission Filers)
01/26/2025	5 Full name of contributor William Bobrick 6 Contributor address; City: 14231 Farm to Market 1464, Sugar	State; Zip Code Land, TX 77498	7 Amount of contribution (\$) 21.13
8 Principal occ	upation / Job title (See Instructions) OR	9 Employer (See Instruct FORT BEND COUN	
Date 01/26/2025	Contributor address: City: 3515 Rolling Green Lane, Missouri C	State: Zip Code	Amount of contribution (S) 104.42
Principal occu BRAPHIC D	pation / Job title (See Instructions) ESIGNER	Employer (See Instruction MARSH	ons)
Date 01/27/2025	Dylan Russell	State: Zip Code City, TX 77459	Amount of contribution (s) 100.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 01/27/2025	Full name of contributor out-of-state RAC Sumita Ghosh Contributor address: City: 4607 Keneshaw Ct, Sugar Land	State; Zip Code	Amount of contribution (\$)
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ns)
	ATTACH ADDITIONAL COPIES OF	F THIS SCHEDULE AS NEE	EDED

11	e Instruction Guide explains how to complete this	orm. 1 Total pages Schedule A1: 25
2 FILER NAM ANGELA	WIERZBICKI	3 Filer ID (Ethics Commission Filers)
4 Date 01/27/2025	5 Full name of contributor out-of-state PAC (Jessica Jubin	
	6 Contributor address: City: 3318 Lily Pond Ct, Missouri City,	TX 77459 50.00
8 Principal occ	upation / Job title (See Instructions)	Employer (See Instructions)
Date 01/27/2025	Full name of contributor out-of-state PAC (III Kara Masharani	Amount of contribution (\$)
01/2//2025	Contributor address: City: 1426 North Medio River Circle, Sugar	State, Zip Code Land, TX 77478
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID	Amount of contribution (\$)
01/27/2025	Contributor addiscussion	State: Zip Code 104.42
Principal occup ECHNICAL	eation / Job title (See Instructions) EDITOR	Employer (See Instructions) CP INC
Date 01/29/2025	Full name of contributor out-of-state PAC (IDI) Amount of contribution (\$)
7172912025	Contributor address: City: 5 5510 South Rice Avenue, Housto	52.37 n, TX 77081
Principal occup VENTS MA	NAGER HA	Employer (See Instructions) RRIS COUNTY

SCHEDULE A1

If the requested information is not applicable, DO

	ested information is not applicable, DO NOT in	iclude this page in the	report.
	e Instruction Guide explains how to complete this	s form.	1 Total pages Schedule A1: 25
ANGELA	WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date 01/29/2025	5 Full name of contributor out-of-state PAC Angela Hanan	C (ID#)	7 Amount of contribution (\$)
	6 Contributor address: City: 903 Goldfinch Ave, Sugar Land	State: Zip Code I, TX 77478	1,000.00
8 Principal occi	pation / Job title (See Instructions)	9 Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC Peter Wierzbicki	(ID#:)	Amount of contribution (\$)
01/29/2025	Contributor address; City: 4104 N. Mayan Dr, Hernando, F	State: Zip Code	200.00
Principal occup RETIRED	eation / Job title (See Instructions)	Employer (See Instruction	ens)
Date 01/29/2025	Full name of contributor cut-of-state PAC Pamela Farinas	(ID#:)	Amount of contribution (\$)
112012020	Contributor address; City; 8507 Chancellorsville Lane, Houston,	State; Zip Code TX 77083	20.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction REGION 4	ns)
Date	Full name of contributor out-of-state PAC (1D#)	Amount of contribution (\$)
02/02/2025	Contributor address: City: 16831 Dry Creek Falls Boulevard, Cy	State: Zip Code press, TX 77433	104.42
Principal occupi	ation / Job title (See Instructions)	Employer (See Instruction	
	ATTACH ADDITIONAL COPIES OF If contributor is out-of-state PAC, please see Instruct	THIS SCHEDULE AS NEE	DED orting requirements.

The	Instruction Guide explains how to complete	this form.	1 Total pages Schedule A1: 25
2 FILER NAME ANGELA	WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date 02/03/2025	5 Full name of contributor cut-of-state PAC (ID#) Charles Sanders 6 Contributor address; City; State; Zip Code 5614 Dairybrook Cove, Sugar Land, TX 77479		7 Amount of contribution (S) 104.42
	pation / Job title (See Instructions) DEVELOPMENT	9 Employer (See Instruct	cions)
Date 02/03/2025	Full name of contributor out-of-state Brittany Sterling Contributor address: City: 1919 Bending Green Drive, A	State: Zip Code	Amount of contribution (\$) 52.37
	pation / Job title (See Instructions) ATIVE ASSISTANT	Employer (See Instruction HARRIS COUNTY	ions)
Date 02/04/2025	Paula Hansen Contributor address; City: 6639 Alicant Drive, Sugar Lan	State; Zip Code	Amount of contribution (\$) 104.42
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date 02/04/2025	Full name of contributor cut-of-state P Virginia Sidrony Contributor address; City; 7707 Green Path Court, Sugar Lan	State: Zip Code	Amount of contribution (\$)
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)

ANGELA WIERZBICKI 4 Date 5 Full name of contributor Linda Webb 02/04/2025 2010 N Greens Blvd, Richmond, TX 77406 8 Principal occupation / Job title (See Instructions) Patricia Porcynaluk Contributor address; City: State: Zip Code 2018 Musket Ridge Drive, Richmond, TX 77406 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (S) 100.0 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor 2018 Musket Ridge Drive, Richmond, TX 77406 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Contributor address: City: State: Zip Code 2018 Musket Ridge Drive, Richmond, TX 77406 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Contributor address: City: State: Zip Code 1701 Hermann Drive #605, Houston, TX 77004 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (S) 500.0 Principal occupation / Job title (See Instructions) Principal occupation / Job title (See Instructions) Amount of contribution (S) Amount of contribution (S) Amount of contribution (S) Amount of contribution (S)	The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 25
Linda Webb End Contribution Contribution Contribution Contribution Contribution Contribution Contribution Contributor Cont		WIERZBICKI	3 Filer ID (Ethics Commission Filers)
8 Contributor address; City: State: Zip Code 2010 N Greens Blvd, Richmond, TX 77406 8 Principal occupation / Job title (See Instructions) Date Date D2/04/2025 Full name of contributor Patricia Porcynaluk Contributor address; City: State: Zip Code 2018 Musket Ridge Drive, Richmond, TX 77406 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Ann Hamilton Contributor address: City: State: Zip Code 20/07/2025 Full name of contributor Ann Hamilton Contributor address: City: State: Zip Code 1701 Hermann Drive #605, Houston, TX 77004 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (S) 500.0		Linda Webb	
Date Pull name of contributor out-of-state PAC (ID#	02/04/2025	6 Contributor address; City; State;	Zip Code 1 ()()
Patricia Porcynaluk Contributor address; City; State; Zip Code 2018 Musket Ridge Drive, Richmond, TX 77406 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (S) Ann Hamilton Contributor address; City; State; Zip Code 1701 Hermann Drive #605, Houston, TX 77004 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (S) 500.0	8 Principal occu	pation / Job title (See Instructions) 9 Emp	oyer (See Instructions)
Contributor address; City; State; Zip Code 2018 Musket Ridge Drive, Richmond, TX 77406 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (S) Ann Hamilton Contributor address; City; State; Zip Code 1701 Hermann Drive #605, Houston, TX 77004 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (S) Employer (See Instructions) Amount of contribution (S) Amount of contribution (S) Amount of contribution (S) Amount of contribution (S) Jamaal Smith	Date		Amount of contribution (\$)
Date Full name of contributor aut-of-state PAC (ID#	02/04/2025	Contributor address; City; State;	100.00
Ann Hamilton Contributor address; City: State: Zip Code 1701 Hermann Drive #605, Houston, TX 77004 Principal occupation / Job title (See Instructions) RETIRED Employer (See Instructions) Full name of contributor Jamaal Smith Amount of contribution (\$)	Principal occup	ation / Job title (See Instructions) Empi	oyer (See Instructions)
Contributor address; City; State; Zip Code 1701 Hermann Drive #605, Houston, TX 77004 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (\$) Jamaal Smith	Date 02/07/2025		
Date Full name of contributor put-of-state PAC (ID#) Amount of contribution (\$) Jamaal Smith		Page Section (Company Company	000.00
Jamaal Smith		ation / Job title (See Instructions) Empl	oyer (See Instructions)
00/00/0005	Date	docorate the little	Amount of contribution (\$)
2211 Rocky Cove Ct, Pearland, TX 77584	02/08/2025	Contributor address; City; State;	200.03
Principal occupation / Job title (See Instructions) Employer (See Instructions)			oyer (See Instructions)
PUBLIC SERVICE HARRIS COUNTY	UBLIC SER	VICE HARRI	S COUNTY

The	Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A1: 25
ANGELA	WIERZBICKI		3 Filer ID (Ethics Commission Filers)
Date	5 Full name of contributor out-of-state PAC (II Ricardo Garcia	D#)	7 Amount of contribution (\$)
2/13/2025	6 Contributor address: City: 5426 Marble Ravine Dr., Richmo	State: Zip Code	35.00
Principal occu	pation / Job title (See Instructions)		ens)
Date	Full name of contributor out-of-state PAC (ID	*	Amount of contribution (\$)
2/13/2025		State; Zip Code X 77498	200.00
Principal occup	eation / Job title (See Instructions)	Employer (See Instruction	ns)
Date 2/13/2025	Full name of contributor out-of-state PAC (ID) Maria Delgado	*	Amount of contribution (S)
	Contributor address; City, State; Zip Code 406 Baldinger St, Houston, TX 77011		52.37
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ns)
Date	Full name of contributor out-of-state PAC (IDs	*	Amount of contribution (\$)
2/17/2025	Contributor address: City: 5	State: Zip Code X 77479	75.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	is)
	ATTACH ADDITIONAL COPIES OF T		

	e Instruction Guide explains how to complete this	1 Total pages Schedule A1: 2	
ANGELA	WIERZBICKI	3 Filer ID (Ethics Commission Filers)	
4 Date 02/19/2025	5 Full name of contributor Out-of-sinte PAC Maruthi Devarakonda	(ID#)	7 Amount of contribution (\$)
DET 1812025	6 Contributor address: City: 3315 Reston Landing Lane, Kat	State: Zip Code y, TX 77494	104.42
Principal occi PRECTOR	apation / Job title (See Instructions)	9 Employer (See Instruct	ions)
Date 02/28/2025	Full name of contributor cut-of-state PAC ((10#)	Amount of contribution (\$)
1212012025	Contributor address; City; State; Zip Code 10603 Lakeside Mill Court, Missouri City, TX 77459		100.00
Principal occup	eation / Job title (See Instructions)	Employer (See Instruction	ons)
Date 3/02/2025	Full name of contributor out-of-state PAC (ID#) Vicki Coffman Contributor address; City; State; Zip Code 802 Sycamore Road, Richmond, TX 77469		Amount of contribution (\$)
			52.37
Principal occup ETIRED	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date	Full name of contributor out-of-state PAC (ID	*	Amount of contribution (\$)
3/02/2025	Contributor address: City: 5614 Dairybrook Cove, Sugar La	State: Zip Code	104.42
	ation / Job title (See Instructions)	Employer (See Instructio	ns)

e Instruction Guide explains how to complete t	this form.	1 Total pages Schedule A1: 24
		3 Filer ID (Ethics Commission Filers)
5 Full name of contributor put-of-state Namita Asthana	PAC (ID#)	7 Amount of contribution (\$)
6 Contributor address; City; State; Zip Code 4418 Castlewood Street, Sugar Land, TX 77479		50.00
	9 Employer (See Instruc OFF THE VINE TA	and the second s
Full name of contributor out-of-state F	'AC (ID#)	Amount of contribution (\$)
Contributor address: City; State; Zip Code 2711 Pecan Ridge Drive, Sugar Land, TX 77479		52.37
pation / Job title (See Instructions)	Employer (See Instruct	tions)
Full name of contributor out-of-state P/ Doug Kohn	AC (ID#:)	Amount of contribution (\$)
Contributor address: City: 1307 Woodmere Lane, Richmo	State: Zip Code	156.48
	Employer (See Instruct	ions)
	C (ID#:)	Amount of contribution (\$)
Contributor address, City;	State: Zip Code	100.00
	Employer (See Instruction	ons)
	1	
	WIERZBICKI 5 Full name of contributor Namita Asthana 6 Contributor address; City; 4418 Castlewood Street, Sugar La upation / Job title (See Instructions) Full name of contributor Janice Milo Contributor address; City; 2711 Pecan Ridge Drive, Sugar La pation / Job title (See Instructions) Full name of contributor Doug Kohn Contributor address; City; 1307 Woodmere Lane, Richmonation / Job title (See Instructions) Full name of contributor Dation / Job title (See Instructions) Full name of contributor Dation / Job title (See Instructions) Full name of contributor Contributor address; City; City; Contributor address; City; City: Cit	WIERZBICKI 5 Full name of contributor Namita Asthana 6 Contributor address; City; State; Zip Code 4418 Castlewood Street, Sugar Land, TX 77479 upation / Job title (See Instructions) 9 Employer (See Instructions) Pull name of contributor Janice Milo Contributor address: City; State; Zip Code 2711 Pecan Ridge Drive, Sugar Land, TX 77479 pation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Doug Kohn Contributor address: City; State; Zip Code 1307 Woodmere Lane, Richmond, TX 77406 Pull name of contributor Doug Kohn Contributor address; City; State; Zip Code 1307 Woodmere Lane, Richmond, TX 77406 Employer (See Instructions) Full name of contributor Contributor address: City; State; Zip Code 1307 Woodmere Lane, Richmond, TX 77406 Employer (See Instructions) Contributor address: City; State; Zip Code

T	ne Instruction Guide explains how to complete this	s form.	1 Total pages Schedule A1: 0 C
2 FILER NAM ANGELA	WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date 03/03/2025	5 Full name of contributor cut-of-state PAC LuAnn York	C (ID#)	7 Amount of contribution (S)
	6 Contributor address: City: 3302 Oak Tree Ct, Sugar Land	State: Zip Code	20.00
Principal occ	upation / Job title (See Instructions)	9 Employer (See Instruction	os)
Date 3/04/2025	Susannah Rolf	(ID#)	Amount of contribution (S)
	3119 Tanner Dell Ct, Missouri City, TX 77459		52.37
LINICAL S	peation / Job title (See Instructions) DCIAL WORKER	Employer (See Instructions	9)
Date 03/05/2025	Full name of contributor out-of-state PAC Terri Wang	()D#)	Amount of contribution (\$)
	Contributor address: City: State: Zip Code 5139 Avondale Dr, Sugar Land, TX 77479		25.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	:)
Date 3/05/2025	Full name of contributor out-of-state PAC (DR:	Amount of contribution (\$)
3/00/2023	Contributor address: City: 4514 Bermuda Drive, Sugar Lan	State: Zip Code d. TX 77479	52.37
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions	

The	Instruction Guide explains how to complete	this form.	1 Total pages Schedule A1: 25
2 FILER NAME ANGELA	WIERZBICKI	3 Filer ID (Ethics Commission Filers)	
4 Date 03/10/2025	5 Full name of contributor out-of-state PAC (IDS:) Alice Lee 6 Contributor address; City; State; Zip Code 4922 Valkeith Dr, Houston, TX 77096		7 Amount of contribution (\$)
8 Principal occu CHIEF OF S	Ipation / Job title (See Instructions) TAFF	9 Employer (See Instruc HARRIS COUNTY	I tions)
Date 03/12/2025	Full name of contributor out-of-state Melanie Miller Contributor address: City: 4710 Castlewood Street, Sugar La	State: Zip Code	Amount of contribution (\$) 104.42
Principal occup WRITER	pation / Job title (See Instructions)	Employer (See Instruct MELANGE	tions)
Date 03/13/2025	Full name of contributor out-of-state Vicki Coffman Contributor address; City; 802 Sycamore Road, Richmo	State; Zip Code nd, TX 77469	Amount of contribution (\$) 104.42
Principal occus RETIRED	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 03/16/2025	Full name of contributor out-of-state if Kimberly Hibsch Contributor address: City: 1603 Shining Willow Court, Richmo	State: Zip Code	Amount of contribution (S) 104.42
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	ions)
	ATTACH ADDITIONAL COPIES If contributor is out-of-state PAC, please see ins		

Th	e Instruction Guide explains how to complete t	this form.	1 Total pages Schedule A1: 25
2 FILER NAME ANGELA	WIERZBICKI	3 Filer ID (Ethics Commission Filers)	
4 Date 03/17/2025		PAC (ID#) State; Zip Code nd, TX 77479	7 Amount of contribution (\$) 78.40
8 Principal occi WRITER	upation / Job title (See Instructions)	9 Employer (See Instruct CREATIVE CIRCLE	- 17.
Date 03/19/2025	Full name of contributor cut-of-state F Maruthi Devarakonda Contributor address; City; 3315 Reston Landing Lane, K	State; Zip Code	Amount of contribution (\$) 104.42
Principal occup DIRECTOR	pation / Job title (See Instructions)	Employer (See Instruction BAKER HUGHES	ons)
Date 03/19/2025	Full name of contributor cut-of-state P Mary Walther Contributor address: City: 3518 Ozark St, Houstor	State: Zip Code	Amount of contribution (\$) 26.34
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction DINI SPHERIS	ons)
Date 03/20/2025	Full name of contributor out-of-state Pi Karen Willatt Contributor address; City; 3511 Covey Trail Dr, Missouri	State; Zip Code	Amount of contribution (\$) 52.37
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ns)
	ATTACH ADDITIONAL COPIES	OF THIS SCHEDULE AS NEI	EDED

Th	e Instruction Guide explains how to complete thi	is form.	1 Total pages Schedule A1:
2 FILER NAM			
THE RESERVE OF THE PARTY OF THE	WIERZBICKI	3 Filer ID (Ethics Commission Filers)	
4 Date 03/20/2025	Danielle Metcalfe-Chenail 6 Contributor address; City;	C (ID#) State; Zip Code	7 Amount of contribution (\$)
Principal occ	97 Seafarers Lane, Whites Lak		
· mapar coc	operation / Job moe (See Instructions)	9 Employer (See Instruction	ons)
Date 3/22/2025	Full name of contributor out-of-state PAC Kimberly Bartee Contributor address; City;	State; Zip Code	Amount of contribution (\$) 10.72
	9718 Lafayette Way, Missouri (City, TX 77459	10.12
Principal occup DVISING M	pation / Job title (See Instructions) IANAGER	Employer (See Instruction	ens)
Date 3/22/2025	William Bobrick Contributor address; City:	(ID#) State; Zip Code	Amount of contribution (S) 52.37
Principal occup	14231 Farm to Market 1464, Sugar L pation / Job title (See Instructions)	and, TX 77498 Employer (See Instruction FORT BEND COUNT	ns)
Date	Full name of contributor cut-of-state PAC Joel Clouser	(ID#)	Amount of contribution (\$)
3/22/2025	Contributor address, City: 3026 Pelican Cove, Missouri Cit	State: Zip Code ty, TX 77459	100.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	is)
	ATTACH ADDITIONAL COPIES OF	F THIS SCHEDULE AS NEE	DED

s Schedule A1: 25	1 Total pages Sci	nis form.	to complete ti	Instruction Guide explains how	
thics Commission Filers)	3 Filer ID (Ethics	ANGELA WIERZBICKI			
	7 Amount of con	AC (ID#)	out-of-state F	5 Full name of contributor Sally Curimbaba	4 Date 03/22/2025
50.00	5	State; Zip Code X 77471	city; enberg, T.	6 Contributor address; 313 2nd Street, Ros	
		9 Employer (See Instruct ASL INTERNATION		pation / Job title (See Instructions) NESS OWNER	
contribution (\$)		AC (ID#)	out-of-state Pr	Full name of contributor Andrea Cope	Date 03/22/2025
26.34	Contributor address: City: State; Zip Code 3627 West Creek Club Drive, Missouri City, TX 77459		03/22/2025		
	ns)	Employer (See Instruction		ation / Job title (See Instructions)	Principal occup RETIRED
contribution (\$)	Amount of cont	Full name of contributor out-of-state PAC (IDIE)) Lynn Clouser		Date	
00.00	10	Contributor address: City: State: Zip Code 3006 Sadie Court, Missouri City, TX 77459		03/22/2025	
	ns)	Employer (See Instruction		ation / Job title (See Instructions)	Principal occupe
contribution (\$)	Amount of contr	G ((D#:)	out-of-state PAG	Full name of contributor Melody Wells	Date
04.42	104	State: Zip Code	c _{ity;}	Contributor address: 2523 Ashmont Drive	03/22/2025
	es)	Employer (See Instruction H4D CONSULTING		tion / Job title (See Instructions)	
	DED	F THIS SCHEDULE AS NEE	NAL COPIES C	ATTACH ADDITION TO THE CONTRIBUTION OF T	

Instruction Guide explains how to complete	this form.	1 Total pages Schedule A1: 2
WIERZBICKI	No.	3 Filer ID (Ethics Commission Filers)
5 Full name of contributor out-of-state Amanda Kennair	PAC (ID#)	7 Amount of contribution (\$)
6 Contributor address: City: 4435 Casey Circle, Sugar Lar	State: Zip Code nd, TX 77479	52.37
pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
	PAC (ID#:)	Amount of contribution (\$)
Contributor address; City:	104.42	
ation / Job title (See Instructions) DUNSELOR	Employer (See Instruction SOJOURN CONSU	
Full name of contributor out-of-state P James Davidson	OUT-OFF-STATE FIRE (IDM)	
Contributor address; City; State; Zip Code 3110 Presley Jane Court, Missouri City, TX 77459		50.00
tion / Job title (See Instructions)	Employer (See Instruction CRBG	ons)
Full name of contributor cut-of-state PA Phillip Andrews	AC ((D#:)	Amount of contribution (\$)
Contributor address: City: State: Zip Code 1802 Maidenhair Lane: Sugar Land: TX 77479		104.42
tion / Job title (See Instructions)	Employer (See Instruction SELF EMPOYED	ons)
	5 Full name of contributor Amanda Kennair 6 Contributor address; City: 4435 Casey Circle, Sugar Lar pation / Job title (See Instructions) Full name of contributor Jigisha Doshi Contributor address; City: 7027 Argonne Trail, Sugar Lar ation / Job title (See Instructions) DUNSELOR Full name of contributor James Davidson Contributor address; City: 3110 Presley Jane Court, Missouri ation / Job title (See Instructions) Full name of contributor Contributor address; City: 3110 Presley Jane Court, Missouri Amanda Kennair City: Full name of contributor Contributor address; City: City: Contributor address; City: Contributor address; City: Contributor address; City: 1802 Maidenhair Lane, Sugar	5 Full name of contributor Amanda Kennair 6 Contributor address: City: State: Zip Code 4435 Casey Circle, Sugar Land, TX 77479 pation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Jigisha Doshi Contributor address: City: State: Zip Code 7027 Argonne Trail, Sugar Land, TX 77479 ation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Full name of contributor James Davidson Contributor address: City: State: Zip Code 3110 Presley Jane Court, Missouri City, TX 77459 Ition / Job title (See Instructions) Full name of contributor CRBG Full name of contributor Phillip Andrews Contributor address: City: State: Zip Code 1802 Maidenhair Lane, Sugar Land, TX 77479 Employer (See Instructions) Employer (See Instructions)

SCHEDULE A1

If the requested information is not applicable, DC

	e instruction Guide explains how to complete thi	1 Total pages Schedule A1:	
ANGELA	WIERZBICKI	3 Filer ID (Ethics Commission Filers)	
4 Date 03/22/2025	5 Full name of contributor George Kakkanatt 6 Contributor address; City; State; Zip Code		7 Amount of contribution (\$) 52.37
Principal occ	14014 Cobalt Glen Drive, Sugar Lan		
SYCHOLO	GIST	9 Employer (See Instruction SELF EMPLOYED	ns)
Date 03/22/2025	Full name of contributor out-of-state PAC Ligi Varghese	(ID#:)	Amount of contribution (\$)
	Contributor address: City; State; Zip Code 3603 Duncaster Dr, Missouri City, TX 77459		41.96
Principal occu ADIOLOGY	reation / Job title (See Instructions) / TECHNOLOGIST	Employer (See Instruction	
Date 3/22/2025	Full name of contributor out-of-state PAC (ID#) Christina Barber		Amount of contribution (\$)
OILLIE DE O	Contributor address: City: State: Zip Code 3411 Caloway Ct, Missouri City, TX 77459		21.13
Principal occup	eation / Job title (See Instructions)	Employer (See Instruction	s)
Date	Full name of contributor out-of-state PAC Patty Masters	(ID#)	Amount of contribution (\$)
3/23/2025	23/2025 Contributor address; City: State; Zip Code 3207 Spring Trail Drive, Sugar Land, TX 77479		52.37
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions	s)

SCHEDULE A1

The	Instruction Guide explains how to complete the	his form.	1 Total pages Schedule A1: 25
ANGELA	WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date 03/23/2025	5 Full name of contributor out-of-state P Felicia Moon 6 Contributor address; City;	State; Zip Code	7 Amount of contribution (S) 67.99
	3311 Raleigh Row, Missouri C	City, TX 77459	01.33
	pation / Job title (See Instructions) CONSULTANT	9 Employer (See Instruction CAMPAIGN TEXAS	
Date 03/23/2025	Full name of contributor out-of-state PF Colleen Donart	AC (ID#:)	Amount of contribution (\$)
TO LO LO LO LO	Contributor address: City; 3103 Wagon Trail Drive, Sugar Land	52.37	
Principal occup MERCHAND	ation / Job title (See Instructions)	Employer (See Instruction SYSCO	ens)
Date	Full name of contributor out-of-state PA Melannie Boullion	C (D#:)	Amount of contribution (\$)
3/23/2025	Contributor address: City: 10502 Farmersville Fork, Missouri C	State: Zip Code City, TX 77459	52.37
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ns)
Date	Full name of contributor out-of-state PAG Maruthi Devarakonda	C (ID#:)	Amount of contribution (\$)
3/24/2025	Contributor address; City: 3315 Reston Landing Lane, Ka	State; Zip Code	500.00
Principal occupa	ation / Job title (See Instructions)	Employer (See Instruction BAKER HUGHES	ns)

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Revised 1/1/2025

The	Instruction Guide explains how to complete	this form.	1 Total pages Schedule A1: 25
2 FILER NAME ANGELA	WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor cut-of-state Farha Ahmed	PAC (ID#:)	7 Amount of contribution (\$)
03/24/2025	6 Contributor address; City: 6 Ellicott Way, Sugar Land, T	State; Zip Code X 77479	100.00
8 Principal occu	I upation / Job title (See Instructions)	9 Employer (See Instrue	ctions)
Date	2 SWS	PAC (ID#)	Amount of contribution (S)
03/24/2025	Joanne Gonzales Contributor address: City; 3023 E Steepbank Circle, Sugar Li	State; Zip Code and, TX 77479	50.00
Principal occup	pation / Job title (See Instructions)	Employer (See Instruc	itions)
Date 03/24/2025	Full name of contributor out-of-state in Justine Cherne Contributor address; City; 6028 Rawlings Road, Needvil	State; Zip Code	Amount of contribution (\$) 104.42
Principal occup EGAL ASSI	STANT	Employer (See Instruc ALLEN BOONE HU	L tions) JMPHRIES ROBINSON LLP
Date 03/25/2025	John Atkins	%C (ID#)	Amount of contribution (\$)
	Contributor address; City; 4930 Moss Run Drive, Missouri Cit	State: Zip Code by, TX 77459	104.42
Principal occup	ation / Job title (See Instructions) Y CHAIN	Employer (See Instruc	tions)

SCHEDULE A1

ANGELA WIERZBICKI 5 Full name of contributor out-of-state PAC (ID#	pages Schedule A1: 25 ID (Ethics Commission Filer unt of contribution (\$)	
Michael Sudhalter 6 Contributor address; City: State: Zip Code 5601 Louise Way Drive, Arlington, TX 76017 Principal occupation / Job title (See Instructions) BUSINESS OWNER Date Full name of contributor Contributor address; City: State: Zip Code Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Contributor address; City: State: Zip Code Principal occupation / Job title (See Instructions) Date Full name of contributor Contributor address; City: State: Zip Code Principal occupation / Job title (See Instructions) Date Full name of contributor Contributor address; City: State: Zip Code	unt of contribution (2)	
Principal occupation / Job title (See Instructions) BUSINESS OWNER Date Full name of contributor Contributor address; City: State; Zip Code Principal occupation / Job title (See Instructions) Date Full name of contributor Contributor address; City: State; Zip Code Principal occupation / Job title (See Instructions) Date Full name of contributor cut-of-state PAC (ID#	18.00	
Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#) Amos	\PHY	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Contributor address: City: State: Zip Code Principal occupation / Job title (See Instructions)	Amount of contribution (\$)	
Date Full name of contributor out-of-state PAC (ID#) Amos Contributor address; City; State; Zip Code		
Contributor address; City; State; Zip Code		
Contributor address; City; State; Zip Code	ant of contribution (\$)	
Principal occupation / Job title (See Instructions) Employer (See Instructions)		
Date Full name of contributor out-of-state PAC (ID#) Amou	nt of contribution (S)	
Contributor address, City, State; Zip Code		
Principal occupation / Job title (See Instructions) Employer (See Instructions)		

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Revised 1/1/2025

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

	The Instruction Guide explains how to complete this for	m.	1 Total pages Sche	dule A2 3
ANGEL	A WIERZBICKI		3 Filer ID (Ethics C	commission Filers)
4 TOTAL	OF UNITEMIZED IN-KIND POLITICAL CONTRI	BUTIONS	\$	
5 Date - 03/02/2025		ERIE & DAVIS TOLMAN		9 In-kind contribution description Beverages/Food for Meet & Greet
RETIRE	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	Annual Control of the	AL)(See Instructions)
12 Contributor RETIRE	a principal occupation (FOR JUDICIAL)	13 Contribu	tor's job title (FOR JI,	JDICIAL) (See Instructions)
14 Contributor	s employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributo	r is a shild, lew firm of parent(s) (if any) (FOR JUDICIAL)			
Date 03/04/2025	Full name of contributor out-of-state PAC (IDE) RENEE TEEL Contributor address; City: State; 2222 Streamcrest Lane, Sugar Land, TX	Zip Code 77479	Amount of Contribution \$ 487.13	In-kind contribution description Beverages/Food for Meet & Greet
Principal occ	supation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	the state of the s	AL)(See Instructions)
Contributor's	ED	Contribut	or's job title (FOR JU	DICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	of contributor's spous	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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

	The Instruction Guide explains how to complete this for	m.	1 Total pages Schedule A2: 3		
2 FILER NAI			3 Filer ID (Ethics C	_	
ANGELA	A WIERZBICKI		The factoring of	CHIMISSION FRETS)	
4 TOTAL (OF UNITEMIZED IN-KIND POLITICAL CONTRI	BUTIONS	\$		
5 Date	6 Full name of contributor aut-of-state PAG (IDE)	8 Amount of	9 In-kind contribution	
	SUMITA GHOSH		Contribution S	description	
03/19/2025	7 Contributor address; City, State;	Zip Code	150.00	Beverages/Food for Meet & Greet	
10 Calabian	4607 Keneshaw Ct, Sugar Land, TX	X 1 / 4 /	Check if travel outs	l ide of Texas. Complete Schedule T	
to Principal de	supation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	r (FOR NON-JUDICE	AL)(See Instructions)	
	principal decupation (FOR JUDICIAL)	13 Contribu	tor's job tide (FOR JL	DICIAL) (See Instructions)	
14 Contributors	s employer/law firm (FOR JUDICIAL)	15 Law firm	of contributor's spou	se (if any) (FOR JUDICIAL)	
16 If contributes	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor aut-of-state PAC (ID#		Amount of		
	JENNIFER OBI		Contribution \$	In-kind contribution description	
03/30/2025	Contributor address: City: State: 3026 Golden Hills Lane, Missouri City, TX	Zip Code 77450	244.75	Beverages/Food for Meet & Greet	
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)			e of Texas. Complete Schedule T. (L)(See Instructions)	
Contributor's	principal occupation (FOR JUDICIAL)				
		Contribute	or's job title (FOR JUI	DICIAL) (See Instructions)	
Contributor's	emplayer/law firm (FOR JUDICIAL)	Law firm	of contributor's spaus	e (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
				1	
				T.	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

	The instruction Guide explains how to complete this for	im.	1 Total pages Schedule A2 3
ANGELA	ME WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 TOTAL C	OF UNITEMIZED IN-KIND POLITICAL CONTRI	BUTIONS	\$
5 Date S Full name of contributor out-of-state PAC (ID#		8 Amount of Contribution 9 In-kind contribution description 4,550.70 PRINTING	
10 Principal occ	supation / Job title (FOR NON-JUDICIAL) (See Instructions)		Check if travel cutside of Texas. Complete Schedule er (FOR NGN-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)		utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	16 Law Sim	n of contributor's spouse (if any) (FOR JUDICIAL)
Date	Full name of contributor	Zip Code	Amount of In-kind contribution description Contribution S description Check if travel outside of Texas. Complete Schedule 1
Principal eco	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	r (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	tor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	of contributor's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law film of parent(s) (if any) (FOR JUDICIAL)		

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

SCHEDULE F1

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

1 Total pages Schedule F1	cal Committee Legal Services Expense Print Sala: The Instruction Guide explains how	ng Expense ing Expense nes/Wages/Contract Labor	Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
	2 FILER NAME ANGELA WIERZBICKI	or conquete mis form.	3 Filer ID (Ethics Commission Filers)
4 Date 01/01/2025	5 Payes name USPS		
6 Amount (\$)	7 Payes address;	City,	State Zip Code
14.60	1902 Texas Pkwy, Missouri City, T	X 77489	
PURPOSE OF EXPENDITURE	(a) Category (See Categories Integrat the top of this achedule ADVERTISING EXPENSE	(b) Description MAILING STA	MPS
	(c) Check if travel outside of Texas. Complete Schedule T	Chack if Austr	TX. officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Gandidate / Officeholder name	Office sought	Office held
Date	Payee name		
01/02/2025	ZOOM		
Amount (3) 17.05	Payee address: 55 N Almaden Blvd, San Jose, CA	слу: 95113	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER	PRO ACCOUNT I	DIGITAL COMMUNICATIONS
	Check if travel outside of Texas. Complete Schedule T	Check if Austin.	TX officeholder living expense
Complete QNLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
01/10/2025	Payee name Messina Hof Harvest Green		
500.00 8	Payee address: 1921 Harlem Rd, Richmond, TX 774	Cay: 06	State: Zip Code
QF .	Category (See Categories listed at the top of this schedule) EVENT EXPENSE	Clescription KICK OFF EVEN	NT DEPOSIT
EXPENDITURE	Check filtravel outside of Texas: Complete Schedule T		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	TX. officeholder living expense Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expanse Accounting/Banking Event Expense Loan Repayment/Rembursement Office Overhead/Remai Expense Solicitation/Fundraising Expense Fees Consulting Expense Contributions/Constions Made By FoodBevelege Expense Git/AwardsMemonals Expense Transportation Equipment & Retuted Expense Poling Expense Travel In District Printing Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Legal Services Travel Out Of District Credit Card Payment Other (enter a category not listed above) The instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) ANGELA WIERZBICKI 4 Date 5 Payee name 01/17/2025 East Fort Bend Human Needs Ministries & Amount (\$) 7 Payee address: City: State Zip Code 435 Stafford Run Rd, Stafford, TX 77477 67.428 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE DONATION CHILI COOKOFF OF EXPENDITURE (C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Payee name 01/23/2025 Playbook Sports Bar & Grill Amount (5) Payee address: City: State. Zip Code 3434 FM 1092 Rd #300, Missouri City, TX 77459 676.22 Category (See Categories listed at the top of this schedule) Description EVENT EXPENSE PURPOSE KICK-OFF EVENT OF EXPENDITURE Check if travel outside of Taxas. Complete Schedule T Check if Austin, TX. officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/27/2025 Fort Bend Education Foundation Amount (\$) Payee address: State Zip Code 16431 Lexington Blvd., Sugar Land, TX 77479 367.50 Category (See Categories listed at the top of this schedule) Description **PURPOSE** DONATION GALA EVENT OF EXPENDITURE Check if travel outside of Texas: Complete Schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/DH

SCHEDULE F1

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

1		EXPENDITURE CATE	GORIES	FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Mo Gandidate/Officeholder/Po Credit Card Payment	dt By Mical Committee	Event Expense Fees Food/Geverage Expense GN/Wards/Montonials Expense Legal Services	Loan Repa Office Ove Polling Ex Printing Ex Salaries M	ymentReinbursement theadiRentel Expense sense pense liges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
		The Instruction Guide explain	ns how to c	amplete this form.	
1 Total pages Schedule		AME WIERZBICKI			3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee n	ame			
01/27/2025	Messina	Hof Harvest Green			
6 Amount (\$)	7 Payee at	idress;		City;	State: Zip Code
902.86	8921 Ha	rlem Rd, Richmond, 1	TX 7740		State, Zip Code
8	(a) Categor	y (See Categories listed at the top of this	AND and daily	(b) Description	
PURPOSE OF EXPENDITURE		EXPENSE	And and and a	KICK-OFF EV	'ENT
	(c)	Check if Insvitil outside of Texas, Complete Si	chedule T	Check if Aust	in, TX officeholder fiving expense
Complete ONLY if direct expenditure to benefit C.	Candid. OH	ste / Officeholder name		Office sought	Office held
Date	Payee na	me			
02/03/2025	ZOOM				
Amount (\$) 17.05	Payee ad 55 N Alm	^{dress,} aden Blvd, San Jose,	, CA 951	City;	State, Zip Code
	Category	(See Categories distant at the top of this so	requirer	Description	
PURPOSE OF EXPENDITURE	OTHER				DIGITAL COMMUNICATIONS
		Track if travel outside of Texas. Complete Sci	hedule T	Check if Austr	1, TK, officeholder living expense
Complete <u>DNLY</u> if direct expenditure to benefit 0./		te / Officenolder name		Office sought	Office held
Date	Payee nar				
02/05/2025	Felicia Th				
Amount (\$)	Payee add	1985		City:	
250.00	1 2	eigh Row, Missouri Cit	ty, TX 7	7459	Stare; Zip Code
	Category (See Categories listed at the top of this son	nerdule)	Description	
PURPOSE OF EXPENDITURE	DONATIO			VENT	
	C	nack if travel outside of Texas. Complete Sche	edule 7	Check if Austin.	TX, officencider living expense
Complete ONLY if direct expenditure to benefit C/O		e / Officeholder name		Office sought	Office held
	ATTA	CH ADDITIONAL COPIES O	F THIS SC	HEDULE AS NEED	DED

SCHEDULE F1

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

		EXPENDITURE CATE	GORIES	FOR BOX 8(a)		
Advertising Expense Accounting/Banking Cortrolling Expense Contributions/Donations/Made Condidates/Officeholder/Politic Credit Card Payment	By cal Committee	Event Expense Fees Food@everage Expense GittAwardatMemonals Expense Legal Services The Instruction Guide explain	Loan Rep Office Co Polling E Printing I Selaries/	payment Rembursemens vishead Rental Expense Expense Expense Weges/Contract Lebor	Solicitation/Fundrais Transportation Equi Traviel in District Traviel Out Of Distric Other (enter a categ	oment & Rebited Expense
1 Total pages Schedule F1	THE RESERVE THE PERSON NAMED IN		C 100 Y SOSA		3 Filer ID (Ethic	s Commission Filers)
4 Date 02/07/2025	5 Payee na CHUY'S	NITHE				
6 Amount (S)	7 Payee ad	Idress;		City;	State:	Zip Code
123.59	320 Hwy	6, Sugar Land, TX 7	7478		The second of	Section Section
8	(a) Gategor	y (See Calegories listed at the top of this	schedule)	(b) Description		
PURPOSE OF EXPENDITURE	7.00 (V.00)	BEVERAGE EXPENS		CONSTITUEN	ITS LISTENIN	NG EVENT
	(a)	Check if travel outside of Texas. Complete St	chedule T	Check if Austr	n, TX, officeholder living	expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ate / Officeholder name		Office sought		Office held
Date	Payee nar	me				
02/18/2025	The Excl	hange Club of Sugar L	and			
41.36	Payee soil 4800 Sug	^{dress:} gar Grove Boulevard ≢	# 100, S	city: Stafford, TX 774	State:	Zip Code
PURPOSE OF EXPENDITURE	Category	(See Categories listed at the top of this so	chedule)	Description EVENT TICKE	ETS	
	-	Check if travel outside of Texas. Complete Sci	hedule T.	Check if Austin	TX, officeholder living	expérise
Complete ONLY if direct expenditure to benefit C/OH		te / Officeholder name		Office sought	(Office held
Date 02/40/0005	Payee nar					
02/19/2025	Texas Ca	ampaigns				
700.00	Payee add 9600 Gler	iress; nfield Court #148, Hou	uston, T	сяу; ТХ 77096	State:	Zîp Code
PURPOSE OF EXPENDITURE		See Categories listed at the top of this scr TING EXPENSE	nedule)	Description		
	c	neck if travel busside of Taxas. Complete Sch	equie T	Check if Austin.	TX, officeholder living a	xpense
Complete ONLY if direct expenditure to benefit C/OH		te / Officeholder name		Office sought	(Office held

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
Canadate/Officeholder/Political Contribue
Credit Card Payment

Event Expense Fess FoodSevvrage Expense GritAwards/Memonals Expense Legal Services Loen Repayment Retributement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Weges/Contract Labor

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

	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule F1			3 Filter ID (Ethics Commission Filers)	
4 Date 02/20/2025	5 Payee name Summer Moon Café			
6 Amount (\$)	7 Payee address;	Gity:	State: Zip Code	
6.07	9600 Glenfield Court, Missouri City,	TX 77459	School State	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	FOOD/BEVERAGE EXPENSE	CONSTITUENT MEETING		
	(C) Check if travel outside of Texas. Complete Schedule T	Check if Austi	m. TX, orlicencider living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/D	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
02/24/2025	ADOBE			
Amount (\$)	Payee acciress;	City:	State: Zip Code	
32.46	345 Park Avenue, San Jose, CA 951		States 2p Good	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	OTHER	DIGITAL COMMUNICATIONS		
	Check if travel outside of Texas. Complete Schedule T	Check if Austin	s. T.X. officeholder living expense	
Complete <u>DNLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
02/26/2025	Fort Bend Chamber of Commerce			
Amount (\$)	Payee address;	City:	State: Zip Code	
60.00	445 Commerce Green Blvd., Sugar La	and, TX 77478		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	OTHER	EVENT TICKET		
	Check if travel outside of Tesses Complete Schedule Y	Check if Austin	TX, officeholder living expense	
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(2)

Advertising Expense Accounting Banking Consulting Expense Contributions/Denastons Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense GM/Avends/Wemonials Expense Legal Services

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

Solicitation/Fundralising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a minoring occiliated are an)

Gradit Card Payment Other (enter a dategory not listed above) The Instruction Guide explains how to complete this form. 7 Total pages Schedule F1 2 FILER NAME 3 Filer ID (Ethics Commission Filers) ANGELA WIERZBICKI 4 Date 5 Payee name 03/04/2025 The Write Idea 6 Amount (9) 7 Payee address City: State: Zip Code 1,250.00 2926 Angel Mist Lane, Rosenberg, TX 77471 (a) Collegiony (See Calegories listed at the top of this schedule) (b) Description PURPOSE CONSULTING EXPENSE OF EXPENDITURE Check if travel butside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Payee name USPS 03/05/2025 Amount (\$) Payee address City: State: Zip Code 1902 Texas Pkwy, Missouri City, TX 77489 58.55 Clategory (See Categories listed at the top of this schedule) Description OTHER PURPOSE POSTCARD STAMPS OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete CNLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Payee name 03/06/2025 Mailchimp Amount (\$) Payee address: City Zip Code 405 North Angier Avenue North East, Atlanta, GA 30308 21.32 Category (See Categories listed at the top of this schedule) Description PURPOSE ADVERTISING EXPENSE DIGITAL COMMUNICATIONS OF EXPENDITURE Check if travel outside of Texas, Complete Schedule T Check if Austin, TX, officeholder living expense Complete **DNLY** if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Event Expenses Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Gonsuling Expense Contributions/Distributions Made By Fees F000/Severage Expense Gift/Awards/Memorials Expense Office Overhood/Rental Expense Polling Expense Travail in District Candidate/Officeholder/Political Committee Printing Expense Salanes/Veges/Contact Labor Legal Services Travel Out Of District Credit Card Payment Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) ANGELA WIERZBICKI 4 Date 5 Payee name 03/10/2025 The Exchange Club of Sugar Land 6 Amount (5) City: State: Zip Code 4800 Sugar Grove Boulevard #100, Stafford, TX 77477 50.00 8 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE DONATION EXPENSE EVENT DONATION OF EXPENDITURE Check if travel outside of Texas. Complete Schedule 1 Check if Austin, TX, officeholder living expense 9 Complete QNLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/10/2025 AMAZON Amount (\$) Payee address: City State: Zip Code 410 TERRY AVE N, SEATTLE, WASHINGTON 98109 31.39 Category (See Categories listed at the top of this schedule) Description OTHER PURPOSE PRINTER INK/OFFICE SUPPLIES OF EXPENDITURE Check fittavel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Payee name 03/14/2025 M3 GRAPHICS Amount (\$) Payee address City: State: Zip Code 11730 Wilcrest Dr. Houston, TX 77099 2,297,39 Castegory (See Categories listed at the top of this schedule) Description PURPOSE ADVERTISING EXPENSE DOOR HANGERS & SIGNS EXPENDITURE Check if travel outside of Texas. Complete Schedule T Check if Austin TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/CH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Accoming/Banking Consulting Expense Contributions/Denations Made By Candidate/Officeholder/Political Committee

Evers Expense Fees PoodBeverage Expense Okt/Neards/Memonals Expense Legal Services

Loan Repayment Reimbutterment Office Overhead Rental Expense Polling Expense Printing Expense Salarise/Wages/Contract Lattor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel for District
Other (policy is nationary not lighted after a)

Crititi Card Payment Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1 2 FILER NAME 3 Filer ID (Ethics Commission Filers) ANGELA WIERZBICKI 4 Date 5 Payee name 03/17/2025 Big Frog Custom T-Shirt 6 Amount (\$) 7 Payee address: State: Zip Code 16535 Lexington Blvd #150, Sugar Land, TX 77479 323.15 8 (a) Gabegory (See Categories listed at the top of this schedule) (b) Description PURPOSE OTHER VOLUNTEER T-SHIRTS OF EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Ghack if Austin, TX, officenolder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Canha Payee name 03/21/2025 Texas Campaigns Amount (S) Payee address: State Zip Code 9600 Glenfield Court #148, Houston, TX 77096 700.00 Category (See Categories listed at the top of this schedule) Description CONSULTING EXPENSE PURPOSE OF EXPENDITURE Check if travel outside of Texas, Complete Schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/24/2025 OFF THE VINE Amount (S) Payee address State Zip Code 4220 Cartwright Rd #701, Missouri City, TX 77459 88.74 Category (See Caregories listed at the top of this schedule) Description PURPOSE EVENT EXPENSE VOLUNTEER MEETING OF EXPENDITURE Dheck if travel outside of Texas. Comblete Schedule 1 Check if Austin, TX officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office acuaht Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Event Expense Faxs Loan Repayment/Rembursement Office Overhead/Remail Expense Polling Expense Printing Expense Solicitation/Fundreising Expense Transportation Equipment & Related Expense Consulting Expense Contributions/Constons Made By FoodBeverage Expense Git/Awards/Memorials Expense Travel in District Clandidate/Officeholder/Political Committee Travel Out Of District Legal Services Salaries/Vegeo/Contract Labor Credit Cand Payment Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) ANGELA WIERZBICKI 4 Date 5 Payee name 03/24/2025 USPS 6 Amount (\$) 7 Payee address: State: Zip Code 3130 Grants Lake Blvd, Sugar Land, TX 77479 511.00 8 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE OTHER STAMPS OF EXPENDITURE Check if travel butside of Texas. Complete Schedule T. Chack if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Payee name 03/24/2025 Branding Matters Amount (\$) Payee address. City: State: Zip Code 8034 Hwy 90 #100, Sugar Land, TX 77478 335.00 Gategory (See Categories listed at the top of this schedule) Description OTHER PURPOSE VOLUNTEER T-SHIRTS QF EXPENDITURE Check if travel buside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Payee name 03/24/2025 ADOBE Amount (\$) Payee address; City; State Zip Code 345 Park Avenue, San Jose, CA 95110 32.00 Category (See Categories listed at the top of this schedule) PURPOSE OTHER DIGITAL COMMUNICATIONS

OF EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Check if travel outside of Texas. Complete Schedule 1.

Candidate / Officeftolder name

Office held

Check if Austin, TX. officeholder living expense

Office sought

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 Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transponation Equipment & Related Expense Travel In District Food Consulting Expense Contributions/Donations Made By Food/Beverage Expense Odt/Awards/Memorials Expense Office Overhead/Rental Expense Polling Expense Gandidate/Officeholder/Political Committee Printing Expense Salanes/Wages/Contract Labor Legal Services Travel Out Of District Credit Card Payment Other (enter a category not inted above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1 2 FILER NAME 3 Filer ID (Ethics Commission Filers) ANGELA WIERZBICKI 4 Date 5 Payee name 03/24/2025 JANIE LEYVA 6 Amount (\$) 7 Payee address: City: State: Zip Code 2617 YORKTOWN LN, MISSOURI CITY, TX 77459 160.00 8 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE CONTRACT LABOR CLERICAL DUTIES OF EXPENDITURE Check if travel outside of Texas, Complete Schedule T Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Payee name 03/24/2025 Texas Campaigns Amount (\$) Payee address: City: State Zio Code 9600 Glenfield Court #148, Houston, TX 77096 171.33 Category (See Categories listed at the top of this achequie) Description ADVERTISING EXPENSE PURPOSE SIGN STAKES OF EXPENDITURE Check if I revel outside of Texas. Complete Schequie T Check if Austin, TX, officiaholder living expanse Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/25/2025 M3 Graphics Amount (\$) Payee address. City: State: Zip Code 11730 Wilcrest Dr. Houston, TX 77099 253.31 Category (See Categories listed at the top of this subsidule) Description PURPOSE ADVERTISING EXPENSE SIGNS EXPENDITURE Check if travel outside of Texas. Complete Schedule T Check if Austin TX officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

Zip Code

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Losn Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Contributions/Donations Made By Transportation Equipment & Related Expense Travel In District Food/Severage Expense GRVAwards/Memorials Expense Polima Excuenses Printing Expense Travel Out Of District Candidate/Officeholder/Political Consmittee Legal Services Salaries/Veges/Contract Labor Other (enter a dategory not listed above) Credit Card Payment The Instruction Guids explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 11 ANGELA WIERZBICKI 4 Date 5 Payee name 03/25/2025 STRIPE 6 Amount (5) 7 Payee address: Gity: 354 Oyster Point Boulevard South, San Francisco, CA 94080 392.80 8 (a) Category (See Categories listed at the top of this schedule) (b) Description

PURPOSE FEES BANK TRANSATION FEES OF EXPENDITURE Check if travel outside of Texas: Complete Schedule T Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Payee name 03/27/2025 Willowridge High School Amount (\$) Payee address; City. State: Zip Code P.O. Box 1527, Missouri City, TX 77459 100.00 Category (See Categories listed at the top of this schedule) Description DONATION PURPOSE WALL OF HONOR OF EXPENDITURE Check if travel durside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Office holder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name Amount (5) Payee address: City: State: Zip Code Category (See Categories listed at the top of this schedule) Description PURPOSE OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T Check if Austin, TX: officeholder living expiring Candidate / Officeholder name Complete **DNLY** if direct Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED