

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:

23

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

MRS.

ANGELA

C

NICKNAME

LAST

SUFFIX

ANGIE

WIERZBICKI

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX:

APT / SUITE #:

CITY:

STATE:

ZIP CODE

2311 CREEK MEADOWS DRIVE, MISSOURI CITY,
TX 77459

Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(832)

274-9246

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

MOHAMMAD

NICKNAME

LAST

SUFFIX

JAZZ

AIJAZ

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE):

APT / SUITE #:

CITY:

STATE:

ZIP CODE

12323 ASHFORD HOLLOW DRIVE, SUGAR LAND, TX 77478

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(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
Reporting Limit

☐

Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

3

25

25

THROUGH

Month

Day

Year

4

23

25

11 ELECTION

ELECTION DATE

Month

Day

Year

5

3

25

ELECTION TYPE

☐

Primary

☐

Runoff

☐

Other
Description

☐

General

☐

Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

FORT BEND ISD POSITION 7

14 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐

GENERAL

COMMITTEE ADDRESS

☐

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME
ANGELA WIERZBICKI

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 385.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5,574.73
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,154.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 3,898.26
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Angela Wierzbicki, and my date of birth is 9/20/77.
My address is 2311 Creek Meadows Missouri City, TX 77459 Fort Bend.
(street) (city) (state) (zip code) (country)

Executed in Fort Bend County, State of Texas, on the 25th day of April, 20 25.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19 FILER NAME**

ANGELA WIERZBICKI

20 Filer ID (Ethics Commission Filers)**21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

1.	■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,049.73
2.	■ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 525.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 5,154.00
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	\$

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.

•• Complete only if "Report Type" on page 1 is marked "Final Report" ••

1 C/OH NAME

ANGELA WIERZBICKI

2 Filer ID (Ethics Commission Filers)

3 SIGNATURE

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

Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

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

A. CAMPAIGN FUNDS

Check only one:

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

B. ASSETS

Check only one:

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

Signature of Candidate

5 OFFICEHOLDER

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

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

Signature of Officeholder

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME ANGELA WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date 03/27/2025	5 Full name of contributor out-of-state PAC (ID#: Dexter McCoy Campaign 6 Contributor address; City; State; Zip Code P.O. Box 1398, Richmond, TX 77406	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/27/2025	Full name of contributor out-of-state PAC (ID#: Sonya Brown-Marshall Campaign Contributor address; City; State; Zip Code 2601 Cartwright, Suite D 249, Missouri City, TX 77459	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/27/2025	Full name of contributor out-of-state PAC (ID#: B. Brown Johnson Contributor address; City; State; Zip Code 16714 Quail Run Drive, Missouri, City TX 77489	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/28/2025	Full name of contributor out-of-state PAC (ID#: Iryna Marchiano Contributor address; City; State; Zip Code 1421 Cedarbrook Drive, Houston, TX 77055	Amount of contribution (\$) 260.59
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Chevron Corp
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 12

2 FILER NAME
ANGELA WIERZBICKI

3 Filer ID (Ethics Commission Filers)

4 Date
03/29/20255 Full name of contributor out-of-state PAC (ID#:
Scott Pett

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
3907 Flintrock Ln, Sugar Land, TX 77479

52.37

8 Principal occupation / Job title (See Instructions)
Writer9 Employer (See Instructions)
Rice UniversityDate
03/30/2025Full name of contributor out-of-state PAC (ID#:
Lerin King

Amount of contribution (\$)

Contributor address; City; State; Zip Code
2406 Quail Valley East, Missouri City, TX 77459

21.13

Principal occupation / Job title (See Instructions)
Technical EditorEmployer (See Instructions)
RPC Inc.Date
03/30/2025Full name of contributor out-of-state PAC (ID#:
Adeliah Starr

Amount of contribution (\$)

Contributor address; City; State; Zip Code
2515 Bermuda Dunes Dr, Missouri City, TX 77459

104.42

Principal occupation / Job title (See Instructions)
Product ManagerEmployer (See Instructions)
FETDate
04/01/2025Full name of contributor out-of-state PAC (ID#:
Kara Hagen

Amount of contribution (\$)

Contributor address; City; State; Zip Code
1302 W Donovan St, Houston, TX 77091

100.00

Principal occupation / Job title (See Instructions)
Substitute teacherEmployer (See Instructions)
Houston ISDATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME ANGELA WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date 04/02/2025	5 Full name of contributor out-of-state PAC (ID#: Charles Sanders 6 Contributor address; City; State; Zip Code 5614 Dairybrook Cv, Sugar Land, TX 77479	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions) Business development		9 Employer (See Instructions) Air Liquide
Date 04/03/2025	Full name of contributor out-of-state PAC (ID#: Joshua Jenkins Contributor address; City; State; Zip Code 10619 Lantana Pass, Missouri City, TX 77459	Amount of contribution (\$) 104.42
Principal occupation / Job title (See Instructions) Account director		Employer (See Instructions) Wyndham
Date 04/04/2025	Full name of contributor out-of-state PAC (ID#: Barbara Beskin Contributor address; City; State; Zip Code 2934 Colony Drive, Sugar Land, TX 77479	Amount of contribution (\$) 36.85
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Whole Foods Market
Date 04/04/2025	Full name of contributor out-of-state PAC (ID#: Carlotta Baird Contributor address; City; State; Zip Code 510 Parkview Court, Sugar Land, TX 77498	Amount of contribution (\$) 209.08
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self Employed
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME ANGELA WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date 04/04/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Susannah Rolf 6 Contributor address; City; State; Zip Code 3119 Tanner Dell Ct, Missouri City, TX 77459	7 Amount of contribution (\$) 52.37
8 Principal occupation / Job title (See Instructions) Clinical Social Worker		9 Employer (See Instructions) Lyra
Date 04/04/2025	Full name of contributor out-of-state PAC (ID#: _____) Carolyn Hopkins Contributor address; City; State; Zip Code 3606 Golden Tee Lane, Missouri City, TX 77459	Amount of contribution (\$) 104.70
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/05/2025	Full name of contributor out-of-state PAC (ID#: _____) Saralyn Mcmorris Contributor address; City; State; Zip Code 3503 Summit Lane, Missouri City, TX 77459	Amount of contribution (\$) 52.51
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) University of Houston
Date 04/06/2025	Full name of contributor out-of-state PAC (ID#: _____) Laura Lyle Contributor address; City; State; Zip Code 10726 Battenrock Court, Richmond, TX 77407	Amount of contribution (\$) 21.19
Principal occupation / Job title (See Instructions) Internet safety rater		Employer (See Instructions) Telus Digital
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME ANGELA WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date 04/06/2025	5 Full name of contributor out-of-state PAC (ID#: Emily Paulussen 6 Contributor address; City; State; Zip Code 17403 Fechser Lane, Richmond, TX 77407	7 Amount of contribution (\$) 26.41
8 Principal occupation / Job title (See Instructions) Crossing Guard		9 Employer (See Instructions) FBISD
Date 04/06/2025	Full name of contributor out-of-state PAC (ID#: Cheri Bernazal Contributor address; City; State; Zip Code 7 Misty Crest Dr., Missouri City, TX 77459	Amount of contribution (\$) 21.19
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) FBISD
Date 04/06/2025	Full name of contributor out-of-state PAC (ID#: Monica Babaian Contributor address; City; State; Zip Code 3202 Millers Oak Lane, Sugar Land, TX 77498	Amount of contribution (\$) 21.19
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) FBISD
Date 04/06/2025	Full name of contributor out-of-state PAC (ID#: Toni Carter Contributor address; City; State; Zip Code 4115 Flamingo Court, Pearland, TX 77584	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME ANGELA WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date 04/06/2025	5 Full name of contributor out-of-state PAC (ID#: Archangela DeSilva 6 Contributor address; City; State; Zip Code 2207 Briarmead Drive, Houston, TX 77057	7 Amount of contribution (\$) 21.19
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/07/2025	Full name of contributor out-of-state PAC (ID#: June Tang Contributor address; City; State; Zip Code 1118 Goose Landing Lane, Richmond, TX 77406	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2025	Full name of contributor out-of-state PAC (ID#: Barbara Zack Contributor address; City; State; Zip Code 2602 Creekway Circle, Missouri City, TX 77459	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2025	Full name of contributor out-of-state PAC (ID#: Cathy Wesley Contributor address; City; State; Zip Code 7219 Emerald Glen Drive, Sugar Land, TX 77479	Amount of contribution (\$) 26.41
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME ANGELA WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date 04/07/2025	5 Full name of contributor out-of-state PAC (ID#: Jennifer Ibarra 6 Contributor address; City; State; Zip Code 3219 Shadow View Lane, Missouri City, TX 77459	7 Amount of contribution (\$) 52.51
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) Hootsuite
Date 04/07/2025	Full name of contributor out-of-state PAC (ID#: Heather Hill Contributor address; City; State; Zip Code 726 Johnson Ln, Sugar Land, TX 77479	Amount of contribution (\$) 52.51
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) FBISD
Date 04/08/2025	Full name of contributor out-of-state PAC (ID#: Rachel Klein Contributor address; City; State; Zip Code 8914 Orchard Cove, Missouri City, TX 77459	Amount of contribution (\$) 104.70
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/08/2025	Full name of contributor out-of-state PAC (ID#: Rachel Garza Contributor address; City; State; Zip Code 21006 Redvine Terrace Ct, Richmond, TX 77407	Amount of contribution (\$) 26.41
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME ANGELA WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date 04/08/2025	5 Full name of contributor out-of-state PAC (ID#: Joyce Gallette 6 Contributor address; City; State; Zip Code 3303 McMahon Way, Missouri City, TX 77459	7 Amount of contribution (\$) 26.41
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/09/2025	Full name of contributor out-of-state PAC (ID#: Barbara Beskin Contributor address; City; State; Zip Code 2934 Colony Drive, Sugar Land, TX 77479	Amount of contribution (\$) 52.51
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Whole Foods Market
Date 04/10/2025	Full name of contributor out-of-state PAC (ID#: Corrie Kangas Contributor address; City; State; Zip Code 3035 Avalon Cove Court NW, Rochester, MN 55901	Amount of contribution (\$) 52.51
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) Mayo Clinic
Date 04/10/2025	Full name of contributor out-of-state PAC (ID#: Ashlee Valavala Contributor address; City; State; Zip Code 2307 Orchard Way, Missouri City, TX 77459	Amount of contribution (\$) 21.19
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Cody Stephens Foundation
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME ANGELA WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date 04/10/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Melissa Matthews 6 Contributor address; City; State; Zip Code 9802 Mount Whitney, Missouri City, TX 77459	7 Amount of contribution (\$) 21.19
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/10/2025	Full name of contributor out-of-state PAC (ID#: _____) Chrissy Saunders Contributor address; City; State; Zip Code 2502 Ashby Forest Drive, Missouri City, TX 77459	Amount of contribution (\$) 20.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self Employed
Date 04/10/2025	Full name of contributor out-of-state PAC (ID#: _____) Susannah Rolf Contributor address; City; State; Zip Code 3119 Tanner Dell Court, Missouri City, TX 77459	Amount of contribution (\$) 52.51
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Lyra
Date 04/12/2025	Full name of contributor out-of-state PAC (ID#: _____) Darcey Pett Contributor address; City; State; Zip Code 3907 Flintrock Lane, Sugar Land, TX 77479	Amount of contribution (\$) 104.70
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) FBISD
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME ANGELA WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date 04/12/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Joe French 6 Contributor address; City; State; Zip Code 2702 Williams Grant, Sugar Land, TX 77479	7 Amount of contribution (\$) 104.70
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/12/2025	Full name of contributor out-of-state PAC (ID#: _____) Gulnar Surveyor Contributor address; City; State; Zip Code 4102 Pensacola Oaks Lane, Sugar Land, TX 77479	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/15/2025	Full name of contributor out-of-state PAC (ID#: _____) Johnny Rhodes Contributor address; City; State; Zip Code 2919 Hunters Glen Drive, Missouri City, TX 77459	Amount of contribution (\$) 10.75
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/15/2025	Full name of contributor out-of-state PAC (ID#: _____) Farha Ahmed Contributor address; City; State; Zip Code 6 Ellicot Way, Sugar Land, TX 77479	Amount of contribution (\$) 1,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 12**2** FILER NAME
ANGELA WIERZBICKI**3** Filer ID (Ethics Commission Filers)**4** Date
04/15/2025**5** Full name of contributor out-of-state PAC (ID#:
Peter Wierzbicki**7** Amount of contribution (\$)

50.00

6 Contributor address; City; State; Zip Code
4104 N Mayan Drive, Hernando, TX 34442**8** Principal occupation / Job title (See Instructions)
Retired**9** Employer (See Instructions)Date
04/16/2025Full name of contributor out-of-state PAC (ID#:
Charles Sanders

Amount of contribution (\$)

104.70

Contributor address; City; State; Zip Code
5614 Dairybrook Cove, Sugar Land, TX 77479Principal occupation / Job title (See Instructions)
Business developmentEmployer (See Instructions)
Air LiquideDate
04/16/2025Full name of contributor out-of-state PAC (ID#:
Jeffrey Boney

Amount of contribution (\$)

99.48

Contributor address; City; State; Zip Code
P.O. Box 2239, Missouri City, TX 77459Principal occupation / Job title (See Instructions)
ConsultantEmployer (See Instructions)
Real Talk Media Group, LLCDate
04/19/2025Full name of contributor out-of-state PAC (ID#:
Maruthi Devarakonda

Amount of contribution (\$)

104.42

Contributor address; City; State; Zip Code
3315 Reston Landing Lane, Katy, TX 77494Principal occupation / Job title (See Instructions)
DirectorEmployer (See Instructions)
Baker HughesATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME ANGELA WIERZBICKI		3 Filer ID (Ethics Commission Filers)
4 Date 04/19/2025	5 Full name of contributor out-of-state PAC (ID#: Dolores Jackson 6 Contributor address; City; State; Zip Code 10622 Farmersville Fork, Missouri City, TX 77459	7 Amount of contribution (\$) 52.51
8 Principal occupation / Job title (See Instructions) Film Production		9 Employer (See Instructions) Self Employed
Date	Full name of contributor out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS**SCHEDULE A2**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 2	
2 FILER NAME ANGELA WIERZBICKI		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 525.00	
5 Date 03/22/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lynn Clouser 7 Contributor address; City; State; Zip Code 3006 Sadie Ct, Missouri City, 77459	8 Amount of Contribution \$ 100.00	9 In-kind contribution description Fundraiser food/beverage <small>Check if travel outside of Texas. Complete Schedule T.</small>
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (If any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (If any) (FOR JUDICIAL)			
Date 03/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Felicia Thomas Contributor address; City; State; Zip Code 3311 Raleigh Row, Missouri City, 77459	Amount of Contribution \$ 100.00	In-kind contribution description Fundraiser food/beverage <small>Check if travel outside of Texas. Complete Schedule T.</small>
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor'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 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 form.		1 Total pages Schedule A2: 2	
2 FILER NAME ANGELA WIERZBICKI		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 525.00	
5 Date 03/30/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jennifer Obi 7 Contributor address; City; State; Zip Code 3026 Golden Hills LN, Missouri City, 77459	8 Amount of Contribution \$ 250.00	9 In-kind contribution description Meet & Greet food/beverage <small>Check if travel outside of Texas. Complete Schedule T.</small>
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 04/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Angie & Tom Hanan Contributor address; City; State; Zip Code 903 Goldfinch, Sugar Land, 77478	Amount of Contribution \$ 75.00	In-kind contribution description Meet & Greet food/beverage <small>Check if travel outside of Texas. Complete Schedule T.</small>
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor'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 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.			

**POLITICAL EXPENDITURES MADE
FROM POLITICAL CONTRIBUTIONS****SCHEDULE F1**

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

EXPENDITURE CATEGORIES FOR BOX 8(a)Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card PaymentEvent Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal ServicesLoan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract LaborSolicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5	2 FILER NAME ANGELA WIERZBICKI	3 Filer ID (Ethics Commission Filers)
4 Date 03/27/2025	5 Payee name Willowridge High School Wall of Honor	
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code P.O. Box 1527, Missouri City, TX 77459	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description Golf Tournament
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 03/30/2025	Payee name Johnny Tamales	
Amount (\$) 70.45	Payee address; City; State; Zip Code 2720 FM 1092 Rd, Missouri City, TX 77459	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage	Description Meet and Greet
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 03/31/2025	Payee name Fort Bend Education Foundation	
Amount (\$) 78.50	Payee address; City; State; Zip Code 16431 Lexington Blvd Sugar Land TX 77479	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Pickleball Tournament
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

**POLITICAL EXPENDITURES MADE
FROM POLITICAL CONTRIBUTIONS****SCHEDULE F1**

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

EXPENDITURE CATEGORIES FOR BOX 8(a)Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card PaymentEvent Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal ServicesLoan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract LaborSolicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5	2 FILER NAME ANGELA WIERZBICKI	3 Filer ID (Ethics Commission Filers)
4 Date 03/31/2025	5 Payee name M3 Graphics	
6 Amount (\$) 2,178.53	7 Payee address; 11730 Wilcrest Drive, Houston, TX 77099	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description Signs
	(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	Office sought Office held
Date 04/02/2025	Payee name Janie Leyva	
Amount (\$) 150.00	Payee address; 2617 Yorktown Ln, Missouri City, TX 77459	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting	Description Clerical Services
	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 04/02/2025	Payee name The Write Idea	
Amount (\$) 774.50	Payee address; 2926 Angel Mist Lane, Rosenberg, TX 77471	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description Mailing Reimbursements
	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
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5	2 FILER NAME ANGELA WIERZBICKI	3 Filer ID (Ethics Commission Filers)
4 Date 04/07/2025	5 Payee name Mailchimp	
6 Amount (\$) 21.32	7 Payee address; City; State; Zip Code 405 N Angier Ave. NE, Atlanta, GA 30308	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description Digital communications
	(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		
Date 04/08/2025	Candidate / Officeholder name Texas Campaigns	
Amount (\$) 190.26	Payee address; City; State; Zip Code 9600 Glenfield Court, Houston, TX 77096	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE	Description Sign Stakes
	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		
Date 04/09/2025	Candidate / Officeholder name USPS	
Amount (\$) 56.00	Payee address; City; State; Zip Code 1902 Texas Parkway, Missouri City, TX 77489	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description Mailing Stamps
	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		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5		2 FILER NAME ANGELA WIERZBICKI		3 Filer ID (Ethics Commission Filers)	
4 Date 04/11/2025		5 Payee name Canva			
6 Amount (\$) 15.00		7 Payee address; City; State; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE		(b) Description Digital communications		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 04/14/2025		Payee name USPS			
Amount (\$) 30.80		Payee address; City; State; Zip Code 225 Matlage Way, Sugar Land, TX 77478			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other		Description Mailing Stamps		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 04/16/2025		Payee name M3 Graphics			
Amount (\$) 1,299.00		Payee address; City; State; Zip Code 11730 Wilcrest Drive, Houston, TX 77099			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING EXPENSE		Description Mailer Marketing		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5	2 FILER NAME ANGELA WIERZBICKI	3 Filer ID (Ethics Commission Filers)
4 Date 04/18/2025	5 Payee name H-E-B	
6 Amount (\$) 49.00	7 Payee address; City; State; Zip Code 4724 Highway 6, Missouri City, TX 77459	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) OTHER	(b) Description Volunteer Snacks
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 04/19/2025	Payee name STRIPE	
Amount (\$) 140.12	Payee address; City; State; Zip Code 354 Oyster Point Boulevard South, San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FEES	Description Bank Fees
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

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