

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

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

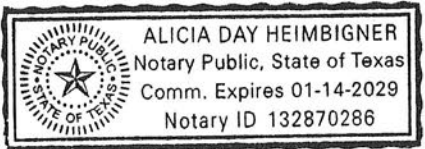
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13 C / OH NAME Horn, Ana-Alicia	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.									
<table style="width:100%"> <tr> <td style="width:20%">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS		
	COMMITTEE TYPE	COMMITTEE NAME								
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS								
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME								
	COMMITTEE CAMPAIGN TREASURER ADDRESS									

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,964.84
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,432.76
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,293.01
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,199.93

17 AFFIDAVIT



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

 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ana-Alicia Horn, this the 2 day of April, 2025, to certify which, witness my hand and seal of office.

Alicia Heimbigner Alicia Heimbigner Coordinator School Board Services
 Signature of officer administering Printed name of officer administering Title of officer administering oath

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

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18 FILER NAME Horn, Ana-Alicia		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,525.84
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 439.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 2,199.93
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 5,432.76
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/14 Rpt: 4/29
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 02/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayala, Karen	7 Amount of Contribution (\$) \$52.37
6 Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
8 Principal occupation / Job title (See Instructions) unemployed		9 Employer (See Instructions) unemployed
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernal, Natalia	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions) Birdie images
Date 01/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowling, Harlan	Amount of Contribution (\$) \$26.34
Contributor address; City; State; Zip Code [REDACTED] Burleson, TX 76028		
Principal occupation / Job title (See Instructions) SWE		Employer (See Instructions) Enilon
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chien, Vincent	Amount of Contribution (\$) \$52.37
Contributor address; City; State; Zip Code [REDACTED] Arlington, TX 76001		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) FWISD
Date 01/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Stanton	Amount of Contribution (\$) \$520.87
Contributor address; City; State; Zip Code [REDACTED] Trophy Club, TX 76262		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Brushfire Technology

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 2/14 Rpt: 5/29

2 FILER NAME
Horn, Ana-Alicia

3 Filer ID

4 Date 02/04/2025
5 Full name of contributor out-of-state PAC (ID#: _____)
Conatser, Lisa

7 Amount of Contribution (\$) \$26.34

6 Contributor address; City; State; Zip Code
[REDACTED]
Mansfield, TX 76063

8 Principal occupation / Job title (See Instructions)
Counselor

9 Employer (See Instructions)
Self

Date 02/23/2025
Full name of contributor out-of-state PAC (ID#: _____)
Conatser, Lisa

Amount of Contribution (\$) \$52.37

Contributor address; City; State; Zip Code
[REDACTED]
Mansfield, TX 76063

Principal occupation / Job title (See Instructions)
unemployed

Employer (See Instructions)
unemployed

Date 01/26/2025
Full name of contributor out-of-state PAC (ID#: _____)
Conatser-Agnew, Kim

Amount of Contribution (\$) \$26.34

Contributor address; City; State; Zip Code
[REDACTED]
Grand Prairie, TX 75052

Principal occupation / Job title (See Instructions)
Chief of Staff

Employer (See Instructions)
Mallard Group

Date 02/23/2025
Full name of contributor out-of-state PAC (ID#: _____)
Coronado, Rosanna

Amount of Contribution (\$) \$100.00

Contributor address; City; State; Zip Code
[REDACTED]
Red Oak, TX 75154

Principal occupation / Job title (See Instructions)
Administrative Assistant

Employer (See Instructions)
Dallas Central Appraisal District

Date 01/28/2025
Full name of contributor out-of-state PAC (ID#: _____)
Cramer, Julie

Amount of Contribution (\$) \$26.34

Contributor address; City; State; Zip Code
[REDACTED]
Mansfield, TX 76063

Principal occupation / Job title (See Instructions)
unemployed

Employer (See Instructions)
unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/14 Rpt: 6/29
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 02/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dandan, Rhonda	7 Amount of Contribution (\$) \$52.37
6 Contributor address; City; State; Zip Code [REDACTED] Arlington, TX 76001		
8 Principal occupation / Job title (See Instructions) unemployed		9 Employer (See Instructions) unemployed
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Cynthia	Amount of Contribution (\$) \$104.42
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Mary Kay Consultant		Employer (See Instructions) Self
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deen, Brittany	Amount of Contribution (\$) \$26.34
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans Sr., Michael	Amount of Contribution (\$) \$104.42
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Clergy		Employer (See Instructions) Bethlehem Baptist
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ezeonu, Junior	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code [REDACTED] Grand Prairie, TX 75054		
Principal occupation / Job title (See Instructions) Political consultant		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/14 Rpt: 7/29
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 02/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felker, Sandra ----- 6 Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063	7 Amount of Contribution (\$) \$52.37
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) MISD
Date 03/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Caroline ----- Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063	Amount of Contribution (\$) \$52.37
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fiagome, Corinne ----- Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063	Amount of Contribution (\$) \$52.37
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self employed
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Meggan ----- Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geisel, Annette ----- Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063	Amount of Contribution (\$) \$26.34
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/14 Rpt: 8/29
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 03/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Shanthi	7 Amount of Contribution (\$) \$52.37
6 Contributor address; City; State; Zip Code [REDACTED] Eureka, CA 95501		
8 Principal occupation / Job title (See Instructions) Sr. Manager, Candidate Recruitment & Training		9 Employer (See Instructions) LCV
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch, Michele	Amount of Contribution (\$) \$52.37
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) Life by Design
Date 03/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gooch, Michele	Amount of Contribution (\$) \$52.37
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herzberg, Matt	Amount of Contribution (\$) \$26.34
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Parkway Construction
Date 01/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horn, William	Amount of Contribution (\$) \$104.42
Contributor address; City; State; Zip Code [REDACTED] Dallas, TX 75219		
Principal occupation / Job title (See Instructions) General Contractor		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/14 Rpt: 9/29
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 02/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hsia, Michelle	7 Amount of Contribution (\$) \$104.42
6 Contributor address; City; State; Zip Code Arlington, TX 76015		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) N/A
Date 02/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunter, Jordan	Amount of Contribution (\$) \$26.34
Contributor address; City; State; Zip Code Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Digital Media Specialist		Employer (See Instructions) TSI
Date 03/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunter, Klaudia	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Business Operations		Employer (See Instructions) Gartner
Date 03/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Joe	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Insurance		Employer (See Instructions) Self
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Chamele	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Grand Prairie, TX 75052		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Mansfield ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/14 Rpt: 10/29
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 01/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Christina	7 Amount of Contribution (\$) \$26.34
6 Contributor address; City; State; Zip Code [REDACTED] Grand Prairie, TX 75052		
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) National Life Group
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Christina	Amount of Contribution (\$) \$52.37
Contributor address; City; State; Zip Code [REDACTED] Grand Prairie, TX 75052		
Principal occupation / Job title (See Instructions) Internal wholesaler		Employer (See Instructions) National Life Group
Date 02/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaiser, Rachel	Amount of Contribution (\$) \$10.72
Contributor address; City; State; Zip Code [REDACTED] Wellington, FL 33414		
Principal occupation / Job title (See Instructions) Customer Success Manager		Employer (See Instructions) Brushfire
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kayode, Lanicia	Amount of Contribution (\$) \$52.37
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Misd
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimme, Emili	Amount of Contribution (\$) \$104.42
Contributor address; City; State; Zip Code [REDACTED] Dallas, TX 75224		
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) Lockheed Martin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/14 Rpt: 11/29
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 03/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landry, Valerie	7 Amount of Contribution (\$) \$52.37
6 Contributor address; City; State; Zip Code [REDACTED] Arlington, TX 76001		
8 Principal occupation / Job title (See Instructions) Hospitality		9 Employer (See Instructions) The Sanford House
Date 01/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Constable Sandra	Amount of Contribution (\$) \$104.42
Contributor address; City; State; Zip Code [REDACTED] Kennedale, TX 76060		
Principal occupation / Job title (See Instructions) Elected Official		Employer (See Instructions) Tarrant County
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockett, Nikayela	Amount of Contribution (\$) \$26.34
Contributor address; City; State; Zip Code [REDACTED] Grand Prairie, TX 75054		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Legal Aid of Northwest Texas
Date 02/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockhart, Brittany	Amount of Contribution (\$) \$52.37
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Director of Operations		Employer (See Instructions) Proper HOA Management
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcucci, Karen	Amount of Contribution (\$) \$104.42
Contributor address; City; State; Zip Code [REDACTED] MANSFIELD, TX 76063		
Principal occupation / Job title (See Instructions) Quality Engineer		Employer (See Instructions) Mouser Electronics

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/14 Rpt: 12/29
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 02/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCracken, Lauren	7 Amount of Contribution (\$) \$52.37
6 Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
8 Principal occupation / Job title (See Instructions) unemployed		9 Employer (See Instructions) unemployed
Date 02/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCracken, Thomas James	Amount of Contribution (\$) \$10.72
Contributor address; City; State; Zip Code [REDACTED] MANSFIELD, TX 76063		
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) American Airlines
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCracken, Thomas James	Amount of Contribution (\$) \$10.72
Contributor address; City; State; Zip Code [REDACTED] MANSFIELD, TX 76063		
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) American Airlines
Date 02/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCracken, Thomas James	Amount of Contribution (\$) \$10.72
Contributor address; City; State; Zip Code [REDACTED] MANSFIELD, TX 76063		
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) American Airlines
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCracken, Thomas James	Amount of Contribution (\$) \$10.72
Contributor address; City; State; Zip Code [REDACTED] MANSFIELD, TX 76063		
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) American Airlines

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/14 Rpt: 13/29
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 03/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCracken, Thomas James	7 Amount of Contribution (\$) \$10.72
6 Contributor address; City; State; Zip Code [REDACTED] MANSFIELD, TX 76063		
8 Principal occupation / Job title (See Instructions) Pilot		9 Employer (See Instructions) American Airlines
Date 03/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCracken, Thomas James	Amount of Contribution (\$) \$10.72
Contributor address; City; State; Zip Code [REDACTED] MANSFIELD, TX 76063		
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) American Airlines
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Christina	Amount of Contribution (\$) \$26.34
Contributor address; City; State; Zip Code [REDACTED] GRAND PRAIRIE, TX 75054		
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) The LOOMIS Agency
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Claire	Amount of Contribution (\$) \$10.72
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Pianist		Employer (See Instructions) Trekorda
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owner, Timothy	Amount of Contribution (\$) \$104.42
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Baylor University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/14 Rpt: 14/29
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 01/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Audrey	7 Amount of Contribution (\$) \$52.37
6 Contributor address; City; State; Zip Code [REDACTED] Carrollton, TX 75007		
8 Principal occupation / Job title (See Instructions) Art licensor		9 Employer (See Instructions) Self-employed
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Celina	Amount of Contribution (\$) \$41.96
Contributor address; City; State; Zip Code [REDACTED] Burleson, TX 76028		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Mansfield ISD
Date 03/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Tony	Amount of Contribution (\$) \$78.40
Contributor address; City; State; Zip Code [REDACTED] El Paso, TX 79912		
Principal occupation / Job title (See Instructions) Employee		Employer (See Instructions) City of Grand Prairie
Date 02/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, Scherron	Amount of Contribution (\$) \$21.13
Contributor address; City; State; Zip Code [REDACTED] Arlington, TX 76002		
Principal occupation / Job title (See Instructions) Field Director		Employer (See Instructions) US House of Representatives
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, Tiara	Amount of Contribution (\$) \$26.34
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Communications		Employer (See Instructions) Texas Christian University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/14 Rpt: 15/29
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 03/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rike, Jennifer	7 Amount of Contribution (\$) \$52.37
6 Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Keb	Amount of Contribution (\$) \$156.48
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Test manager		Employer (See Instructions) Liberty Software
Date 01/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Carmen	Amount of Contribution (\$) \$26.34
Contributor address; City; State; Zip Code [REDACTED] Arlington, TX 76002		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Mansfield ISD
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sealy, Saa	Amount of Contribution (\$) \$52.37
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 03/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Nicole	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Agency owner		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/14 Rpt: 16/29
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 02/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Alexa	7 Amount of Contribution (\$) \$104.42
6 Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
8 Principal occupation / Job title (See Instructions) NP		9 Employer (See Instructions) Methodist Medical Group
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TOOMBS, Jason	Amount of Contribution (\$) \$312.65
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Director of Operations		Employer (See Instructions) H.Betti Industries Inc
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Rachel	Amount of Contribution (\$) \$26.34
Contributor address; City; State; Zip Code [REDACTED] Arlington, TX 76002		
Principal occupation / Job title (See Instructions) Operations		Employer (See Instructions) World Insurance
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toombs, Amy	Amount of Contribution (\$) \$52.37
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Mansfield ISD
Date 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Ebony	Amount of Contribution (\$) \$208.54
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 14/14 Rpt: 17/29

2 FILER NAME
Horn, Ana-Alicia

3 Filer ID

4 Date
03/06/2025

5 Full name of contributor out-of-state PAC (ID#: _____)
Walton, Nancy

7 Amount of Contribution (\$) \$26.34

6 Contributor address; City; State; Zip Code
[REDACTED]
Mansfield, TX 76063

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
02/07/2025

Full name of contributor out-of-state PAC (ID#: _____)
Waters, Courtney

Amount of Contribution (\$) \$10.72

Contributor address; City; State; Zip Code
[REDACTED]
Arlington, TX 76001

Principal occupation / Job title (See Instructions)
Education

Employer (See Instructions)
Education

Date
03/24/2025

Full name of contributor out-of-state PAC (ID#: _____)
Waters, Ethel

Amount of Contribution (\$) \$75.00

Contributor address; City; State; Zip Code
[REDACTED]
Arlington, TX 76001

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
01/26/2025

Full name of contributor out-of-state PAC (ID#: _____)
withrow, Cassie

Amount of Contribution (\$) \$104.42

Contributor address; City; State; Zip Code
[REDACTED]
Deer Park, TX 77536

Principal occupation / Job title (See Instructions)
Chief of Staff

Employer (See Instructions)
Weyland

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/2 Rpt: 18/29	
2 FILER NAME Horn, Ana-Alicia		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/23/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowling, Yvette	8 Amount of contribution (\$) \$40.00	9 In-kind contribution description Snacks
7 Contributor address; City; State; Zip Code [REDACTED] Burleson, TX 76028		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Owner / Creative Director		11 Employer (FOR NON-JUDICIAL) (See instructions) Self / Paradigm Creative	
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 02/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conatser, Lisa	Amount of contribution (\$) \$25.00	In-kind contribution description Snacks
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Licensed Professional Counselor		Employer (FOR NON-JUDICIAL) (See instructions) Self	
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)			
Date 03/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herzberg, Matthew	Amount of contribution (\$) \$192.00	In-kind contribution description Sign Posts
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Project Manager		Employer (FOR NON-JUDICIAL) (See instructions) Parkway Construction	
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)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/2 Rpt: 19/29	
2 FILER NAME Horn, Ana-Alicia		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/23/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Courtney	8 Amount of contribution (\$) \$182.00	9 In-kind contribution description Snacks
	7 Contributor address; City; State; Zip Code [REDACTED] Arlington, TX 76001	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Educational Diagnostician		11 Employer (FOR NON-JUDICIAL) (See instructions) Self	
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)			

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
Sch: 1/1 Rpt: 20/29

2 FILER NAME
Horn, Ana-Alicia

3 Filer ID

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan
01/09/2025

7 Name of lender out-of-state PAC (ID#: _____)
Horn, Ana-Alicia (Mrs.)

9 Loan Amount (\$)
\$2,199.93

6 Is lender a financial institution?
No

8 Lender address; City; State; Zip Code
4098 Water Park Circle

Mansfield, TX 76063

10 Interest Rate

11 Maturity Date

12 Principal occupation / Job title (See Instructions)
Strategic Development Director

13 Employer (See Instructions)
Brushfire

14 Description of Collateral
 None

15 Check if personal funds were deposited into political account (See Instructions)

16 GUARANTOR INFORMATION
 not applicable

17 Name of guarantor

18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed (\$)

20 Principal occupation

21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 1/9 Rpt: 21/29	2 FILER NAME Horn, Ana-Alicia	3 Filer ID
4 Date 02/14/2025	5 Payee name Amazon	
6 Amount (\$) \$63.82	7 Payee address; City; State; Zip Code 10 Terry Ave. North Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Balloons
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Amazon	
Amount (\$) \$35.00	Payee address; City; State; Zip Code 10 Terry Ave. North Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Table Cloths
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2025	Payee name Amazon	
Amount (\$) \$104.23	Payee address; City; State; Zip Code 10 Terry Ave. North Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banner Stand
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 2/9 Rpt: 22/29	2 FILER NAME Horn, Ana-Alicia	3 Filer ID
4 Date 01/24/2025	5 Payee name Donorbox	
6 Amount (\$) \$3.44	7 Payee address; City; State; Zip Code 520 Belle View Blvd #4106 Alexandria, VA 22307	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Platform
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/23/2025	Payee name Family Dream Center	
Amount (\$) \$350.00	Payee address; City; State; Zip Code 1496 Heritage Pkwy Suite 100 Mansfield, TX 76063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kickoff Party Venue Rental
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/01/2025	Payee name Google	
Amount (\$) \$1.64	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace (Jan Partial)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 3/9 Rpt: 23/29	2 FILER NAME Horn, Ana-Alicia	3 Filer ID			
4 Date 03/01/2025	5 Payee name Google				
6 Amount (\$) \$5.62	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace (Feb)			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:30%;">Candidate/Officeholder name</td> <td style="width:30%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 02/28/2025	Payee name Hope Floats Creative				
Amount (\$) \$280.00	Payee address; City; State; Zip Code PO Box 140533 Gainesville, FL 32614				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mira Lagos Magazine			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:30%;">Candidate/Officeholder name</td> <td style="width:30%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 03/13/2025	Payee name Jumbo Property Management				
Amount (\$) \$402.00	Payee address; City; State; Zip Code 9700 Apex Fort Worth, TX 76108				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field Signs Placement			
	<table style="width:100%; border:none;"> <tr> <td style="width:20%;">9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:30%;">Candidate/Officeholder name</td> <td style="width:30%;">Office sought</td> <td style="width:20%;">Office held</td> </tr> </table>		9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 4/9 Rpt: 24/29	2 FILER NAME Horn, Ana-Alicia	3 Filer ID
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4 Date 03/20/2025	5 Payee name Minuteman Press
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6 Amount (\$) \$76.12	7 Payee address; City; State; Zip Code 2384 N. US Hwy 287 #202 Mansfield, TX 76063
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postcards
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/11/2025	Payee name TaylorMade
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Amount (\$) \$169.91	Payee address; City; State; Zip Code 564 N. Walnut Creek Drive #100 Mansfield, TX 76063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Push Cards
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/11/2025	Payee name TaylorMade
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Amount (\$) \$444.99	Payee address; City; State; Zip Code 564 N. Walnut Creek Drive #100 Mansfield, TX 76063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 5/9 Rpt: 25/29	2 FILER NAME Horn, Ana-Alicia	3 Filer ID
4 Date 03/04/2025	5 Payee name TaylorMade	
6 Amount (\$) \$444.37	7 Payee address; City; State; Zip Code 564 N. Walnut Creek Drive #100 Mansfield, TX 76063	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Setup
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/04/2025	Payee name TaylorMade	
Amount (\$) \$552.56	Payee address; City; State; Zip Code 564 N. Walnut Creek Drive #100 Mansfield, TX 76063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field Signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/12/2025	Payee name TaylorMade	
Amount (\$) \$190.50	Payee address; City; State; Zip Code 564 N. Walnut Creek Drive #100 Mansfield, TX 76063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Door Hangers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 6/9 Rpt: 26/29	2 FILER NAME Horn, Ana-Alicia	3 Filer ID
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4 Date 03/12/2025	5 Payee name TaylorMade
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6 Amount (\$) \$125.43	7 Payee address; City; State; Zip Code 564 N. Walnut Creek Drive #100 Mansfield, TX 76063
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field Signs
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/19/2025	Payee name TaylorMade
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Amount (\$) \$218.75	Payee address; City; State; Zip Code 564 N. Walnut Creek Drive #100 Mansfield, TX 76063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Push Cards
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/19/2025	Payee name TaylorMade
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Amount (\$) \$481.10	Payee address; City; State; Zip Code 564 N. Walnut Creek Drive #100 Mansfield, TX 76063
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 7/9 Rpt: 27/29	2 FILER NAME Horn, Ana-Alicia	3 Filer ID
4 Date 03/02/2025	5 Payee name Texas Democratic Party	
6 Amount (\$) \$395.00	7 Payee address; City; State; Zip Code 314 Highland Blvd Austin, TX 78752	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense VAN Access
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/19/2025	Payee name USPS	
Amount (\$) \$67.00	Payee address; City; State; Zip Code 752 N Main St Mansfield, TX 76063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Post Office Box
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/14/2025	Payee name Vista Print	
Amount (\$) \$258.71	Payee address; City; State; Zip Code 275 Wyman Street Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 8/9 Rpt: 28/29	2 FILER NAME Horn, Ana-Alicia	3 Filer ID
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4 Date 01/24/2025	5 Payee name Webflow
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6 Amount (\$) \$19.19	7 Payee address; City; State; Zip Code 398 11th Street, 2nd Floor San Francisco, CA 94103
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting (Monthly)
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/25/2025	Payee name Webflow
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Amount (\$) \$79.00	Payee address; City; State; Zip Code 398 11th Street, 2nd Floor San Francisco, CA 94103
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Template
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/24/2025	Payee name Webflow
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Amount (\$) \$19.19	Payee address; City; State; Zip Code 398 11th Street, 2nd Floor San Francisco, CA 94103
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting (Monthly)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 9/9 Rpt: 29/29	2 FILER NAME Horn, Ana-Alicia	3 Filer ID
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4 Date 03/24/2025	5 Payee name Webflow
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6 Amount (\$) \$19.19	7 Payee address; City; State; Zip Code 398 11th Street, 2nd Floor San Francisco, CA 94103
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting (Monthly)
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/21/2025	Payee name ikenyacare
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Amount (\$) \$626.00	Payee address; City; State; Zip Code 800 W Lonesome Dove Trail Arlington, TX 76001
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Shirts
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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