

# 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	2 Total pages filed: 16
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs.	FIRST Ana-Alicia	MI C
	NICKNAME Ana		SUFFIX Horn
<b>OFFICE USE ONLY</b>			
Date Received			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 4098 Water Park Circle  Mansfield, TX 76063		ZIP CODE
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Michele	MI S
	NICKNAME Gooch		SUFFIX
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1103 Alexis Court Ste 107  Mansfield, TX 76063		
	AREA CODE PHONE NUMBER EXTENSION 512-922-2335		
7 CAMPAIGN TREASURER PHONE			
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year 03/25/2025		Month Day Year 04/23/2025
	THROUGH		
10 ELECTION	ELECTION DATE Month Day Year 05/03/2025		ELECTION TYPE
	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Mansfield ISD Board of Trustees, Place 4

**GO TO PAGE 2**

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

**FORM C/OH  
COVER SHEET PG 2**  
2 of 16

<b>13 C / OH NAME</b> Horn, Ana-Alicia	<b>14 Filer ID</b>
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**15 NOTICE FROM POLITICAL COMMITTEE(S)**  
 Additional Pages

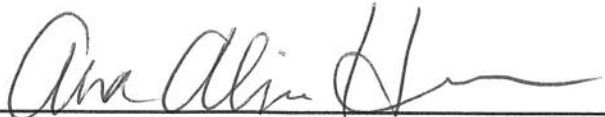
This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE TYPE</b>  <b>COMMITTEE NAME</b>  <b>COMMITTEE ADDRESS</b>  <b>COMMITTEE CAMPAIGN TREASURER NAME</b>  <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>
---------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<b>16 CONTRIBUTION TOTALS</b>	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)	\$	2,663.13
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	2,021.88
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	1,934.26
<b>OUTSTANDING LOAN TOTALS</b>	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 25 day of April, 2025, to certify which, witness my hand and seal of office.

Alicia Heimbigner  
Signature of officer administering

Alicia Heimbigner  
Printed name of officer administering

Coordinator School Board Services  
Title of officer administering oath

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Horn, Ana-Alicia		<b>19 Filer ID</b>	
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE			<b>SUBTOTAL AMOUNT</b>
1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,663.13
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 2,021.88
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**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 1/9 Rpt: 4/16
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 04/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernal, Natalia	7 Amount of Contribution (\$)  \$31.55
6 Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px;"></div> Mansfield, TX 76063		
8 Principal occupation / Job title (See Instructions) Photographer		9 Employer (See Instructions) Birdie Images LLC
Date 04/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanchat, Shanon	Amount of Contribution (\$)  \$26.41
Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px;"></div> Mansfield, TX 76063		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowman, Raymond	Amount of Contribution (\$)  \$101.00
Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px;"></div> Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 04/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunkley, Corliss	Amount of Contribution (\$)  \$156.89
Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px;"></div> Arlington, TX 76012		
Principal occupation / Job title (See Instructions) Specialist		Employer (See Instructions) TEA
Date 04/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Anastasia	Amount of Contribution (\$)  \$52.51
Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 15px; margin-bottom: 5px;"></div> Arlington, TX 76001		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Insurance

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 2/9 Rpt: 5/16
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 04/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conatser, Christian	7 Amount of Contribution (\$) \$42.07
6 Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
8 Principal occupation / Job title (See Instructions) Worker		9 Employer (See Instructions) Gartner
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conatser, Lisa	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coronado, Rosanna	Amount of Contribution (\$) \$104.42
Contributor address; City; State; Zip Code [REDACTED] Red Oak, TX 75154		
Principal occupation / Job title (See Instructions) Admin Asst		Employer (See Instructions) DIs Central Appraisal District
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawkins, Tyshika	Amount of Contribution (\$) \$21.19
Contributor address; City; State; Zip Code [REDACTED] Arlington, TX 76001		
Principal occupation / Job title (See Instructions) Instructional Coach		Employer (See Instructions) Stride K12
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Crystal	Amount of Contribution (\$) \$42.07
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) AISD

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 3/9 Rpt: 6/16
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 03/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guerra, Olivia	7 Amount of Contribution (\$)  \$26.34
6 Contributor address; City; State; Zip Code  Grand Prairie, TX 75054		
8 Principal occupation / Job title (See Instructions) Community Outreach Manager		9 Employer (See Instructions) UTD Center for BrainHealth
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hagan-Cole, Shawan	Amount of Contribution (\$)  \$10.75
Contributor address; City; State; Zip Code  Arlington, TX 76002		
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) Ascension
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hladik, Greg	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hordge, Dr. Tenise	Amount of Contribution (\$)  \$40.00
Contributor address; City; State; Zip Code  Mansfield, TX 76063		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hubbard, Alecia	Amount of Contribution (\$)  \$10.75
Contributor address; City; State; Zip Code  Arlington, TX 76014		
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) HandleyCreativeDesigns

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/9 Rpt: 7/16
<b>2</b> FILER NAME Horn, Ana-Alicia		<b>3</b> Filer ID
<b>4</b> Date 03/30/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Charnele	<b>7</b> Amount of Contribution (\$) \$25.00
<b>6</b> Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 20px; margin-bottom: 5px;"></div> Grand Prairie, TX 75052		
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) Mansfield ISD
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Clinton	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 20px; margin-bottom: 5px;"></div> Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) .		Employer (See Instructions) .
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kozak, Phyllis	Amount of Contribution (\$) \$52.37
Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 20px; margin-bottom: 5px;"></div> Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 03/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lang, Chris	Amount of Contribution (\$) \$26.34
Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 20px; margin-bottom: 5px;"></div> Addison, TX 75001		
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Studio 3 Marketing
Date 04/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanning, Megan	Amount of Contribution (\$) \$104.42
Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 20px; margin-bottom: 5px;"></div> Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 5/9 Rpt: 8/16
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 04/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lee, Sandra	7 Amount of Contribution (\$)  \$42.07
6 Contributor address; City; State; Zip Code [REDACTED]  Kennedale, TX 76060		
8 Principal occupation / Job title (See Instructions) Constable		9 Employer (See Instructions) Tarrant County
Date 03/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lowe, Adam	Amount of Contribution (\$)  \$26.34
Contributor address; City; State; Zip Code [REDACTED]  Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Account Manager		Employer (See Instructions) RHSB
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mason, Ben	Amount of Contribution (\$)  \$52.51
Contributor address; City; State; Zip Code [REDACTED]  Grand Prairie, TX 75054		
Principal occupation / Job title (See Instructions) Energy Consultant		Employer (See Instructions) Schneider Electric
Date 03/27/2025	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 04/03/2025	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

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 6/9 Rpt: 9/16
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 04/10/2025	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 04/17/2025	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 03/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Kathy	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 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Kathy	Amount of Contribution (\$) \$42.07
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self
Date 03/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Carmen	Amount of Contribution (\$) \$21.13
Contributor address; City; State; Zip Code [REDACTED] Arlington, TX 76002		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Mansfield ISD

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 7/9 Rpt: 10/16
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 04/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sealy, Sara	7 Amount of Contribution (\$) \$42.07
6 Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
8 Principal occupation / Job title (See Instructions) Finance		9 Employer (See Instructions) FCB
Date 04/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharpless, Carlson	Amount of Contribution (\$) \$10.75
Contributor address; City; State; Zip Code [REDACTED] Dallas, TX 75243		
Principal occupation / Job title (See Instructions) IT Specialist		Employer (See Instructions) Texas Instruments Incorporated
Date 04/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shiyanbade, Suwebatu	Amount of Contribution (\$) \$104.42
Contributor address; City; State; Zip Code [REDACTED] Arlington, TX 76001		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) GI alliance
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stiles, Sara	Amount of Contribution (\$) \$42.07
Contributor address; City; State; Zip Code [REDACTED] Fort Worth, TX 76244		
Principal occupation / Job title (See Instructions) Director of Strategic Marketing		Employer (See Instructions) Hyly.AI
Date 03/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez, Celina	Amount of Contribution (\$) \$65.00
Contributor address; City; State; Zip Code [REDACTED] Arlington, TX 76016		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) UTA

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/9 Rpt: 11/16
<b>2</b> FILER NAME Horn, Ana-Alicia		<b>3</b> Filer ID
<b>4</b> Date 04/17/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veach, Ashley	<b>7</b> Amount of Contribution (\$) \$313.47
<b>6</b> Contributor address; City; State; Zip Code [REDACTED] Pantego, TX 76013		
<b>8</b> Principal occupation / Job title (See Instructions) Stylist		<b>9</b> Employer (See Instructions) Self
Date 03/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Clayton	Amount of Contribution (\$) \$520.87
Contributor address; City; State; Zip Code [REDACTED] Arlington, TX 76001		
Principal occupation / Job title (See Instructions) Operations Director		Employer (See Instructions) Brushfire
Date 04/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Courtney	Amount of Contribution (\$) \$42.07
Contributor address; City; State; Zip Code [REDACTED] Arlington, TX 76001		
Principal occupation / Job title (See Instructions) Educational Diagnostician		Employer (See Instructions) Self employed
Date 04/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitefield, Alyson	Amount of Contribution (\$) \$26.41
Contributor address; City; State; Zip Code [REDACTED] Grand Prairie, TX 75054		
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Texas AHEC East - DFW Region
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilhelm, Chad	Amount of Contribution (\$) \$42.07
Contributor address; City; State; Zip Code [REDACTED] Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Bloomfield homes

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 9/9 Rpt: 12/16
2 FILER NAME Horn, Ana-Alicia		3 Filer ID
4 Date 03/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Karen	7 Amount of Contribution (\$) <span style="float: right;">\$52.37</span>
6 Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 15px; margin: 5px 0;"></div> Mansfield, TX 76063		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Self-employed
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Kelley	Amount of Contribution (\$) <span style="float: right;">\$42.07</span>
Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 15px; margin: 5px 0;"></div> Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 04/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) withrow, Cassie	Amount of Contribution (\$) <span style="float: right;">\$42.07</span>
Contributor address; City; State; Zip Code <div style="background-color: black; width: 150px; height: 15px; margin: 5px 0;"></div> Deer Park, TX 77536		
Principal occupation / Job title (See Instructions) chief of Staff		Employer (See Instructions) Weyland Properties

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/4 Rpt: 13/16		<b>2</b> FILER NAME Horn, Ana-Alicia		<b>3</b> Filer ID	
<b>4</b> Date 04/18/2025		<b>5</b> Payee name Academy			
<b>6</b> Amount (\$) \$216.48		<b>7</b> Payee address; City; State; Zip Code 1711 E Broad St  Mansfield, TX 76063			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tents	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/19/2025		Payee name Academy			
Amount (\$) \$43.28		Payee address; City; State; Zip Code 1711 E Broad St  Mansfield, TX 76063			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cable Locks	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/01/2025		Payee name Ace Hardware			
Amount (\$) \$18.39		Payee address; City; State; Zip Code 2000 Matlock Rd Ste 120  Mansfield, TX 76063			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Grommet Kit	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# 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.

<b>1</b> Total pages Schedule F1: Sch: 2/4 Rpt: 14/16	<b>2</b> FILER NAME Horn, Ana-Alicia	<b>3</b> Filer ID
<b>4</b> Date 04/15/2025	<b>5</b> Payee name City of Arlington	
<b>6</b> Amount (\$) \$90.00	<b>7</b> Payee address; City; State; Zip Code 101 W. Abram St.  Arlington, TX 76010	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Park Reservation
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 04/01/2025	Payee name Google	
Amount (\$) \$5.62	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy  Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 (Mar)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 04/21/2025	Payee name Home Depot	
Amount (\$) \$72.97	Payee address; City; State; Zip Code 1725 N US-287  Mansfield, TX 76063	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gloves and Zip Ties
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.

<b>1</b> Total pages Schedule F1: Sch: 3/4 Rpt: 15/16	<b>2</b> FILER NAME Horn, Ana-Alicia	<b>3</b> Filer ID
<b>4</b> Date 04/07/2025	<b>5</b> Payee name Jumbo Property Management	
<b>6</b> Amount (\$) \$190.00	<b>7</b> Payee address; City; State; Zip Code 9700 Apex  Fort Worth, TX 76108	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</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
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 03/31/2025	Payee name TaylorMade	
Amount (\$) \$415.90	Payee address; City; State; Zip Code 564 N. Walnut Creek Drive #100  Mansfield, TX 76063	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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 04/18/2025	Payee name TaylorMade	
Amount (\$) \$415.90	Payee address; City; State; Zip Code 564 N. Walnut Creek Drive #100  Mansfield, TX 76063	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Endorsement Field Signs
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.

<b>1</b> Total pages Schedule F1: Sch: 4/4 Rpt: 16/16	<b>2</b> FILER NAME Horn, Ana-Alicia	<b>3</b> Filer ID
<b>4</b> Date 04/18/2025	<b>5</b> Payee name TaylorMade	
<b>6</b> Amount (\$) \$374.90	<b>7</b> Payee address; City; State; Zip Code 564 N. Walnut Creek Drive #100  Mansfield, TX 76063	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Endorsement Push Cards
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 04/04/2025	Payee name Tractor Supply	
Amount (\$) \$87.73	Payee address; City; State; Zip Code 1550 Highway 157 N  Mansfield, TX 76063	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Posts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 04/21/2025	Payee name Tractor Supply	
Amount (\$) \$90.71	Payee address; City; State; Zip Code 1550 Highway 157 N  Mansfield, TX 76063	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Posts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held