

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00091335	2 Total pages filed: 19	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Alexandria	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/05/2026		
	NICKNAME LAST SUFFIX Anderson			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 1209 Cometa Street Austin, TX 78721		Date Hand-delivered or Date Postmarked	
			Receipt # Amount	
			Date Processed	
			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Amanda			
	NICKNAME LAST SUFFIX Masino			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7805 Mandela Bend Austin, TX 78744			
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 763-7765			
8 REPORT TYPE	☐ January 15 ☒ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only) ☐ July 15 ☐ 8th day before election ☐ Exceeded modified reporting limit ☐ Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07/01/2026 09/24/2026			
10 ELECTION	ELECTION DATE Month Day Year 11/03/2026		ELECTION TYPE ☐ Primary ☐ Runoff ☐ Other ☐ General ☐ Special	
11 OFFICE	OFFICE HELD (if any) None Travis		12 OFFICE SOUGHT (if known) Council Member, District 1 Place Austin District 1	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME	Anderson, Alexandria	14 Filer ID	(Ethics Commission Filers)
		00091335	

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. <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.	
	COMMITTEE TYPE	COMMITTEE NAME
	☐ GENERAL	COMMITTEE ADDRESS
	☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,450.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 18,018.25
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 7,273.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFADAVIT

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.

Alexandria Anderson

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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 Anderson, Alexandria		19 Filer ID (Ethics Commission Filers) 00091335
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,450.00
2.	☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	☐ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	☐ SCHEDULE E: LOANS	\$
5.	☒ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 18,018.25
6.	☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	☐ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	☐ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	☐ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	☐ 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: 1/11 Rpt: 4/19
2 FILER NAME Anderson, Alexandria		3 Filer ID (Ethics Commission Filers) 00091335
4 Date 09/23/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Addison, Doug 6 Contributor address; City; State; Zip Code 2100 Palo Pinto Drive Unit 2 Austin, TX 78723	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Senior software developer		9 Employer (See Instructions) UT Austin
Date 08/07/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Addison, Doug Contributor address; City; State; Zip Code 2100 Palo Pinto, Unit 2 Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions) UT Austin
Date 08/13/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Anderson, Deborah Contributor address; City; State; Zip Code 1026 7th Avenue La Grange, IL 60525	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Retired
Date 08/15/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Anderson, Willie Contributor address; City; State; Zip Code 11213 S Forrestville Ave Chicago, IL 60628	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 09/02/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Atkins Inglehart, Dianne Contributor address; City; State; Zip Code 13619 Briken Bridge Dr Houston, TX 77085	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired Houston ISD Literacy Coach		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/11 Rpt: 5/19
2 FILER NAME Anderson, Alexandria		3 Filer ID (Ethics Commission Filers) 00091335
4 Date 09/02/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Brazziell, Cordelia 6 Contributor address; City; State; Zip Code 20021 Harrier Flight Trl Pflugerville, TX 78660	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Stay at home mom		9 Employer (See Instructions) None
Date 08/16/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Brown, Emily Contributor address; City; State; Zip Code 10006 S. Bell Ave Chicago, IL 60643	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) CPS
Date 08/15/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Calhoun, Derrick Contributor address; City; State; Zip Code 803 Haldemann Ave Joliet, IL 60436	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Retired
Date 09/10/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Coley, Carma Contributor address; City; State; Zip Code 19715 Sunset Drive Warrensville Heights, OH 44122	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Retired
Date 08/25/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Cotton, Chad Contributor address; City; State; Zip Code 2313 Towbridge Circle Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/11 Rpt: 6/19
2 FILER NAME Anderson, Alexandria		3 Filer ID (Ethics Commission Filers) 00091335
4 Date 08/09/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Crawford, Michael 6 Contributor address; City; State; Zip Code PO Box 105 Oak Lawn, IL 60453	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Legislator		9 Employer (See Instructions) IL General Assembly
Date 08/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Dant, Jenni Contributor address; City; State; Zip Code 7732 S Avalon Chicago, IL 60619	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Manager of Sports		Employer (See Instructions) Chicago Public Schools
Date 08/09/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Davis, Lisa Contributor address; City; State; Zip Code 8620 S Pulaski Rd Chicago, IL 60652	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions) State of Illinois
Date 09/06/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Ely, Robert Contributor address; City; State; Zip Code 4403 Leslie Ave Austin, TX 78721	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) National Domestic Violence Hotline
Date 08/23/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Fly, Sally Contributor address; City; State; Zip Code 1805 Adriane Dr Unit B Austin, TX 78721	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/11 Rpt: 7/19
2 FILER NAME Anderson, Alexandria		3 Filer ID (Ethics Commission Filers) 00091335
4 Date 08/25/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Frensley, Nathalie 6 Contributor address; City; State; Zip Code 5601 Montview Street Austin, TX 78756	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 07/05/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Fuller-Barnes, Sharon Contributor address; City; State; Zip Code 12103 Timber Arch Lane Manor, TX 78653	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) BLOOM Solutions
Date 07/01/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Gunnells, Kevin Contributor address; City; State; Zip Code 4203 Leslie Ave Austin, TX 78721	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Work		Employer (See Instructions) Self
Date 08/04/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Hook, Kristin Contributor address; City; State; Zip Code PO Box 17834 San Antonio, TX 78666	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) UCS
Date 08/31/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Klose, Joanna Contributor address; City; State; Zip Code 5216 Basswood Ln Austin, TX 78723	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/11 Rpt: 8/19
2 FILER NAME Anderson, Alexandria		3 Filer ID (Ethics Commission Filers) 00091335
4 Date 07/05/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Leach, Nikki 6 Contributor address; City; State; Zip Code 6708 Lebanon Ave Philadelphia, PA 19151	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Agent		9 Employer (See Instructions) WME Sports
Date 08/13/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Lowery, April Contributor address; City; State; Zip Code 4631 s Indiana Ave, Apt 3S Chicago, IL 60653	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Actress/Nurse Practitioner		Employer (See Instructions) QTC
Date 09/02/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Luong, Casie Contributor address; City; State; Zip Code 7213 Eastcrest Dr Austin, TX 78752	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self
Date 08/15/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Manley, Diane Contributor address; City; State; Zip Code 43 Moses Dr Jackson, TN 38305	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 07/31/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Marriott, Sue Contributor address; City; State; Zip Code 4107 Avenue G 4107 Ave G Austin, TX 78751	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/11 Rpt: 9/19
2 FILER NAME Anderson, Alexandria		3 Filer ID (Ethics Commission Filers) 00091335
4 Date 09/02/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Masino, Amanda 6 Contributor address; City; State; Zip Code 7805 Mandela Bend Austin, TX 78744	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Dean		9 Employer (See Instructions) Huston-Tillotson University
Date 07/21/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Merriweather, Sandra Contributor address; City; State; Zip Code 12319 Uttimer Lane Austin, TX 78753	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) AISD
Date 07/05/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Meyer, Kerrin Contributor address; City; State; Zip Code 3007 Cedarlawn Cir Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Nonprofit administration		Employer (See Instructions) The Refugee Collective
Date 07/30/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Miller, Patrick Contributor address; City; State; Zip Code 5708 W Parmer Ln Apt 3101 Austin, TX 78727	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Austin Independent School District
Date 07/05/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Mohsenian Rahman, Sepideah Contributor address; City; State; Zip Code 5025 Thacher Rd Ojai, CA 93023	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) The Thacher School

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/11 Rpt: 10/19
2 FILER NAME Anderson, Alexandria		3 Filer ID (Ethics Commission Filers) 00091335
4 Date 08/15/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Murchison, Marilyn 6 Contributor address; City; State; Zip Code 7447 S South Shore Drive Apt #32F Chicago, TX 60649	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Director of City Colleges		9 Employer (See Instructions) Literacy Chicago
Date 08/31/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Nevill, Heather Contributor address; City; State; Zip Code 1701 Elmhurst Drive Austin, TX 78741	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Engineering		Employer (See Instructions) Google
Date 08/23/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Nyfeler, John Contributor address; City; State; Zip Code 1805 Adriane Drive Unit B Austin, TX 78721	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/19/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Paulus, Eric Contributor address; City; State; Zip Code 1201 Grove Blvd #903 Austin, TX 78741	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Restoration Ecologist		Employer (See Instructions) Ecology Action of Texas
Date 09/10/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Pincham, Robert and Sharon Contributor address; City; State; Zip Code 9313 S. Wabash Avenue Chicago, IL 60619	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/11 Rpt: 11/19
2 FILER NAME Anderson, Alexandria		3 Filer ID (Ethics Commission Filers) 00091335
4 Date 07/01/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Price, Lucy 6 Contributor address; City; State; Zip Code 501 West Avenue 3501 Austin, TX 78701	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Hospitality		9 Employer (See Instructions) Self
Date 08/14/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Richards, Dan Contributor address; City; State; Zip Code 611 W 15th Street Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Richards Rodriguez & Skeith
Date 07/01/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Rogers, Andrei Contributor address; City; State; Zip Code 118 Milestone Rd Liberty Hill, TX 78642	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Technology		Employer (See Instructions) Technology
Date 09/23/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Segal, Marc Contributor address; City; State; Zip Code 7107 Ritchie Drive Austin, TX 78724	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Account manager		Employer (See Instructions) Rekor
Date 09/06/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Sewell, Parker Contributor address; City; State; Zip Code 1191 Greenwood Ave Unit 2 Austin, TX 78721	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Deloitte

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/11 Rpt: 12/19
2 FILER NAME Anderson, Alexandria		3 Filer ID (Ethics Commission Filers) 00091335
4 Date 09/21/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Sigers, Faye 6 Contributor address; City; State; Zip Code 6807 Willamette Drive Austin, TX 78723	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) None		9 Employer (See Instructions) Self
Date 07/01/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Slack, William Contributor address; City; State; Zip Code 1307 E. M. Franklin Avenue Austin, TX 78721	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Home builder		Employer (See Instructions) Self employed
Date 07/11/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Tabrizi, Saurah Contributor address; City; State; Zip Code 17 Malvern Ave, Apt 2 Richmond, VA 23221	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Student
Date 07/02/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Timms, Jeffrey Contributor address; City; State; Zip Code 175 E Delaware Pl Apt 7804 Chicago, IL 60611	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Uncle Nearest Whiskey
Date 08/15/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Williams, Reginald Contributor address; City; State; Zip Code 8425 S Jeffery Blvd Chicago, IL 60617	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/11 Rpt: 13/19
2 FILER NAME Anderson, Alexandria		3 Filer ID (Ethics Commission Filers) 00091335
4 Date 08/15/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Woodard, Brenda 6 Contributor address; City; State; Zip Code 7753 S Euclid Ave Chicago, IL 60649	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) None
Date 08/13/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Woodard, Sharhonda Contributor address; City; State; Zip Code 7753 S. Euclid Chicago, IL 60649	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Helpdesk Technician		Employer (See Instructions) Alzheimer's Association
Date 08/13/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Woodard, Shatonya Contributor address; City; State; Zip Code 7753 S Euclid Ave Chicago, IL 60649	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Human Resource Consultant		Employer (See Instructions) Capital One
Date 08/13/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Woodard, Shatonya Contributor address; City; State; Zip Code 7753 S Euclid Ave Chicago, IL 60649	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Human Resource Consultant		Employer (See Instructions) Capital One
Date 08/15/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Woolfork, Felix Contributor address; City; State; Zip Code 1515 Stanley Blvd Calumet City, IL 60409	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/11 Rpt: 14/19
2 FILER NAME Anderson, Alexandria		3 Filer ID (Ethics Commission Filers) 00091335
4 Date 08/13/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Wright, Marva 6 Contributor address; City; State; Zip Code 9342 S Chicago Ave Chicago, IL 60619	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Accounts Payable Specialist		9 Employer (See Instructions) Evanston/Skokie District 65

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: 1/5 Rpt: 15/19	2 FILER NAME Anderson, Alexandria	3 Filer ID (Ethics Commission Filers) 00091335
4 Date 08/13/2026	5 Payee name Binny's Beverage Depot	
6 Amount (\$) \$126.29	7 Payee address; City; State; Zip Code 3447 W 95th St Evergreen Park, IL 60805	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Beverages for event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/22/2026	Candidate/Officeholder name Chevron	
Amount (\$) \$85.44	Payee address; City; State; Zip Code 4611 E Martin Luther King Blvd Austin, TX 78721	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Gas
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/11/2026	Candidate/Officeholder name City of Austin	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 301 W 2nd St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Filing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 2/5 Rpt: 16/19	2 FILER NAME Anderson, Alexandria	3 Filer ID (Ethics Commission Filers) 00091335
4 Date 08/01/2026	5 Payee name Donateway	
6 Amount (\$) \$97.67	7 Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Donation processing fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2026	Payee name Donateway	
Amount (\$) \$252.10	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Donation processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/03/2026	Payee name Genco Strategies	
Amount (\$) \$6,000.00	Payee address; City; State; Zip Code 3810 Medical Pkwy #245 Austin, TX 78756	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign support
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: 3/5 Rpt: 17/19	2 FILER NAME Anderson, Alexandria	3 Filer ID (Ethics Commission Filers) 00091335
4 Date 08/03/2026	5 Payee name Genco Strategies	
6 Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code 3810 Medical Pkwy #245 Austin, TX 78756	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign support
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2026	Payee name Genco Strategies	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 3810 Medical Pkwy #245 Austin, TX 78756	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Campaign support
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/19/2026	Payee name Hunt, Houston	
Amount (\$) \$375.00	Payee address; City; State; Zip Code 124 Private Rd 5743 Thornton, TX 76687	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Canvassing
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: 4/5 Rpt: 18/19	2 FILER NAME Anderson, Alexandria	3 Filer ID (Ethics Commission Filers) 00091335
4 Date 09/09/2026	5 Payee name Kelly Graphics	
6 Amount (\$) \$4,126.49	7 Payee address; City; State; Zip Code 8222 N Lamar Blvd Austin, TX 78753	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Doorhangers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/23/2026	Payee name Sallee, Harvick	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 201 E 21st Austin, TX 78705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Canvassing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/13/2026	Payee name Sam's Club	
Amount (\$) \$95.95	Payee address; City; State; Zip Code 9400 S Western Ave Evergreen Park, IL 60805	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Food for event
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: 5/5 Rpt: 19/19	2 FILER NAME Anderson, Alexandria	3 Filer ID (Ethics Commission Filers) 00091335
4 Date 08/13/2026	5 Payee name Walmart	
6 Amount (\$) \$59.31	7 Payee address; City; State; Zip Code 2500 W 95th St Evergreen Park, IL 60805	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Food for event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held