

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: **21**

**3 CANDIDATE / OFFICEHOLDER NAME**

MS / MRS / MR FIRST MI  
Mr. Shenghao  
NICKNAME LAST SUFFIX  
Daniel Wang

**4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS**

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
PO Box 201563 Austin TX 78720

**5 CANDIDATE / OFFICEHOLDER PHONE**

AREA CODE PHONE NUMBER EXTENSION  
( 512 ) 806-1734

**6 CAMPAIGN TREASURER NAME**

MS / MRS / MR FIRST MI  
Ms. Mingfei  
NICKNAME LAST SUFFIX  
Alice Yi

**7 CAMPAIGN TREASURER ADDRESS**  
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
11900 Jollyville Rd. 201563 Austin TX 78759

**8 CAMPAIGN TREASURER PHONE**

AREA CODE PHONE NUMBER EXTENSION  
( 512 ) 658-7687

**9 REPORT TYPE**

January 15  30th day before election  Runoff  15th day after campaign treasurer appointment (Officeholder Only)  
 July 15  8th day before election  Exceeded Modified Reporting Limit  Final Report (Attach C/OH - FR)

**10 PERIOD COVERED**

Month Day Year Month Day Year  
7 / 1 / 25 THROUGH 12 / 31 / 25

**11 ELECTION**

ELECTION DATE ELECTION TYPE  
Month Day Year  Primary  Runoff  Other Description  
 General  Special

**12 OFFICE**

OFFICE HELD (if any)  
Travis Central Appraisal District Board of Directors, Place 2

**13 OFFICE SOUGHT** (if known)

**14 NOTICE FROM POLITICAL COMMITTEE(S)**

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

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

**OFFICE USE ONLY**

Date Received



Date Hand-delivered or Date Postmarked

Receipt # Amount \$

Date Processed

Date Imaged

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

<b>15 C/OH NAME</b> Shenghao "Daniel" Wang		<b>16 Filer ID</b> (Ethics Commission Filers)
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 150.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,760.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 150.01
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 1,098.01
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2,895.49
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,500.00

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

**Shenghao "Daniel" Wang**

Signature of Candidate or Officeholder

**Please complete either option below:**

**(1) Affidavit**

NOTARY STAMP / SEAL

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**OR**

**(2) Unsworn Declaration**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.  
(month) (year)

Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

# FORM C/OH COVER SHEET PG 3

19 FILER NAME

Shenghao "Daniel" Wang

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,610.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 948.00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>15</b>
2 FILER NAME <b>Shenghao "Daniel" Wang</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>07/02/2025</b>	5 Full name of contributor out-of-state PAC (ID#: _____) <b>Ashley Batista</b>	<b>50.00</b>
	6 Contributor address; City; State; Zip Code [REDACTED] <b>Austin TX 78744</b>	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>07/06/2025</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>William Ton</b>	<b>100.00</b>
	Contributor address; City; State; Zip Code [REDACTED] <b>Austin TX 78747</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>07/06/2025</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Chris Gillett</b>	<b>100.00</b>
	Contributor address; City; State; Zip Code [REDACTED] <b>Austin TX 78701</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>07/07/2025</b>	Full name of contributor out-of-state PAC (ID#: _____) <b>Pat Armstrong</b>	<b>25.00</b>
	Contributor address; City; State; Zip Code [REDACTED] <b>Austin TX 78731</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 15

2 FILER NAME

Shenghao "Daniel" Wang

3 Filer ID (Ethics Commission Filers)

4 Date

07/07/2025

5 Full name of contributor

JoAnn McKenzie

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

25.00

6 Contributor address;

City;

State; Zip Code

Austin TX 78731

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/13/2025

Full name of contributor

Mary Ann Espiritu

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

25.00

Contributor address;

City;

State; Zip Code

Austin TX 78703

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/13/2025

Full name of contributor

Audrey Kuang

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

50.00

Contributor address;

City;

State; Zip Code

Austin TX 78746

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/13/2025

Full name of contributor

Cecelia Burke

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

100.00

Contributor address;

City;

State; Zip Code

Austin TX 78731

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 15

2 FILER NAME

Shenghao "Daniel" Wang

3 Filer ID (Ethics Commission Filers)

4 Date

07/13/2025

5 Full name of contributor

Idona Griffith

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address;

City;

State;

Zip Code

Austin TX 78759

7 Amount of contribution (\$)

50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/13/2025

Full name of contributor

Talia D'Abramo

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

Austin TX 78753

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/13/2025

Full name of contributor

Lucy Frost

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

Manchaca TX 78652

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/14/2025

Full name of contributor

Pooja Sethi

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

Austin TX 78730

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 15

2 FILER NAME

Shenghao "Daniel" Wang

3 Filer ID (Ethics Commission Filers)

4 Date

07/14/2025

5 Full name of contributor

Shawn Lu

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address;

City;

State;

Zip Code

Austin TX 78724

7 Amount of contribution (\$)

25.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/14/2025

Full name of contributor

Blessing Oyeniya

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

Austin TX 78744

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/14/2025

Full name of contributor

Mary Naranjo

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

Austin TX 78731

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/14/2025

Full name of contributor

Eric Vormelker

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

Austin TX 78752

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 15

2 FILER NAME

Shenghao "Daniel" Wang

3 Filer ID (Ethics Commission Filers)

4 Date

07/14/2025

5 Full name of contributor

Kevin Tian

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address;

City;

State; Zip Code

Austin TX 78705

7 Amount of contribution (\$)

25.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/16/2025

Full name of contributor

Angelica Harrison

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State; Zip Code

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/16/2025

Full name of contributor

Scott Ihrig

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State; Zip Code

Austin TX 78734

Amount of contribution (\$)

35.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/16/2025

Full name of contributor

Joan Brook

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State; Zip Code

Austin TX 78702

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 15

2 FILER NAME

Shenghao "Daniel" Wang

3 Filer ID (Ethics Commission Filers)

4 Date

07/17/2025

5 Full name of contributor

Diana Gomez

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address;

City;

State; Zip Code

Austin TX 78757

7 Amount of contribution (\$)

25.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/17/2025

Full name of contributor

Alexandra Elliot

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State; Zip Code

Austin TX 78732

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/17/2025

Full name of contributor

Thu Trinh

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State; Zip Code

Austin TX 78754-5948

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/18/2025

Full name of contributor

Jose Alcala

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State; Zip Code

Austin TX 78745

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 15

2 FILER NAME

Shenghao "Daniel" Wang

3 Filer ID (Ethics Commission Filers)

4 Date

07/18/2025

5 Full name of contributor

Ard Ardalan

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address;

City;

State; Zip Code

[REDACTED] austin TX 78704

7 Amount of contribution (\$)

25.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/19/2025

Full name of contributor

Mahir Iqbal

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State; Zip Code

[REDACTED] Austin TX 78723

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/19/2025

Full name of contributor

Richard Lavine

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State; Zip Code

[REDACTED] Austin TX 78704

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/19/2025

Full name of contributor

Ruth Wunderlich

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State; Zip Code

[REDACTED] Austin TX 78748

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 15

2 FILER NAME  
Shenghao "Daniel" Wang

3 Filer ID (Ethics Commission Filers)

4 Date  
07/19/2025

5 Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Stal Shrestha

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code  
[REDACTED] Austin TX 78701

25.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
07/19/2025

Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Elliott Naishtat

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
[REDACTED] Austin TX 78757

250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/19/2025

Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Sharon Yoo

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
[REDACTED] Hutto TX 78634

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
07/19/2025

Full name of contributor out-of-state PAC (ID#: \_\_\_\_\_)  
Esther Fleharty

Amount of contribution (\$)

Contributor address; City; State; Zip Code  
[REDACTED] Austin TX 78758

70.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 15

2 FILER NAME

Shenghao "Daniel" Wang

3 Filer ID (Ethics Commission Filers)

4 Date

07/19/2025

5 Full name of contributor

Wendy Kalthoff

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address;

City;

State;

Zip Code

Austin TX 78752

7 Amount of contribution (\$)

25.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/20/2025

Full name of contributor

Brian McGiverin

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

Austin TX 78751

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2025

Full name of contributor

David Albert

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

Austin TX 78741

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2025

Full name of contributor

Matthew McCoy

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

Austin TX 78750

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 15

2 FILER NAME

Shenghao "Daniel" Wang

3 Filer ID (Ethics Commission Filers)

4 Date

07/20/2025

5 Full name of contributor

Emma Zuckerman

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

25.00

6 Contributor address;

City;

State;

Zip Code

Austin TX 78731

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/20/2025

Full name of contributor

Emily Smith

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

25.00

Contributor address;

City;

State;

Zip Code

Austin TX 78749

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2025

Full name of contributor

Marypaz Araya

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

50.00

Contributor address;

City;

State;

Zip Code

Doral FL 33122

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2025

Full name of contributor

Iman Lulla

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

25.00

Contributor address;

City;

State;

Zip Code

Austin TX 78704

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 15

2 FILER NAME

Shenghao "Daniel" Wang

3 Filer ID (Ethics Commission Filers)

4 Date

07/20/2025

5 Full name of contributor

Mark McCulloch

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

25.00

6 Contributor address;

City;

State;

Zip Code

Austin TX 78741

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/20/2025

Full name of contributor

Mary Ann Espiritu

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

25.00

Contributor address;

City;

State;

Zip Code

Austin TX 78703

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2025

Full name of contributor

Zohaib Qadri

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

25.00

Contributor address;

City;

State;

Zip Code

Austin TX 78723

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2025

Full name of contributor

Nicholas Chu

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

70.00

Contributor address;

City;

State;

Zip Code

Austin TX 78757

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 15

2 FILER NAME

Shenghao "Daniel" Wang

3 Filer ID (Ethics Commission Filers)

4 Date

07/20/2025

5 Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Kelly Garemko

7 Amount of contribution (\$)

50.00

6 Contributor address;

City;

State; Zip Code

Austin TX 78749

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/20/2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Jeremy Hendricks

Amount of contribution (\$)

50.00

Contributor address;

City;

State; Zip Code

Austin TX 78753

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Kathleen Mitchell

Amount of contribution (\$)

25.00

Contributor address;

City;

State; Zip Code

Austin TX 78702

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2025

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Ana Cortez

Amount of contribution (\$)

25.00

Contributor address;

City;

State; Zip Code

Manor TX 78653

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 15

2 FILER NAME

Shenghao "Daniel" Wang

3 Filer ID (Ethics Commission Filers)

4 Date

07/20/2025

5 Full name of contributor

John S. Adair

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

50.00

6 Contributor address;

City;

State; Zip Code

Austin TX 78751

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/20/2025

Full name of contributor

Dr. Kristin Hook

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

25.00

Contributor address;

City;

State; Zip Code

San Antonio TX 78212

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2025

Full name of contributor

James Wilson

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

25.00

Contributor address;

City;

State; Zip Code

Austin TX 78752

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2025

Full name of contributor

Gilbert Garcia

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

25.00

Contributor address;

City;

State; Zip Code

Austin TX 78701

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 15

2 FILER NAME

Shenghao "Daniel" Wang

3 Filer ID (Ethics Commission Filers)

4 Date

07/20/2025

5 Full name of contributor

Karen Horan

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address;

City;

State;

Zip Code

Austin TX 78703

7 Amount of contribution (\$)

50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/20/2025

Full name of contributor

Shawn Lu

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

Austin TX 78724

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2025

Full name of contributor

Selena Xie

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

Austin TX 78721

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/20/2025

Full name of contributor

Jessica Cohen

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address;

City;

State;

Zip Code

Austin TX 78741

Amount of contribution (\$)

25.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **15**

2 FILER NAME

Shenghao "Daniel" Wang

3 Filer ID (Ethics Commission Filers)

4 Date

07/20/2025

5 Full name of contributor

Jeffrey Clemmons

out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

**25.00**

6 Contributor address;

City;

State; Zip Code

Austin TX 78722

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

07/20/2025

Full name of contributor

Liani Lye

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

**10.00**

Contributor address;

City;

State; Zip Code

Austin TX 78741

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City;

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address;

City;

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

**If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>3</b>	<b>2</b> FILER NAME Shenghao "Daniel" Wang	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 08/05/2025	<b>5</b> Payee name Greg Casar for Congress	
<b>6</b> Amount (\$) <b>100.00</b>	<b>7</b> Payee address; City; State; Zip Code P.O. Box 301923 Austin, TX 78703	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Officeholder	<b>(b)</b> Description Donation to Casar Campaign
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
Date 08/25/2025	Payee name USPS	
Amount (\$) <b>94.00</b>	Payee address; City; State; Zip Code <b>475 L'Enfant Plaza SW, Washington, D.C. 20260</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description USPS PO Box Fee
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>
Date 09/09/2025	Payee name Progress Texas	
Amount (\$) <b>250.00</b>	Payee address; City; State; Zip Code <b>PO Box 132162 Dallas, TX 75313</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense	Description Event Sponsorship
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right">Office held</span>

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 3		<b>2</b> FILER NAME Shenghao "Daniel" Wang		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 07/14/2025		<b>5</b> Payee name Travis County Democratic Party			
<b>6</b> Amount (\$) 84.00		<b>7</b> Payee address; City; State; Zip Code PO Box 684263 Austin, Texas 78768-4263			
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Officeholder		<b>(b)</b> Description TCDP Donation		
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 08/14/2025		Payee name Travis County Democratic Party			
Amount (\$) 84.00		Payee address; City; State; Zip Code PO Box 684263 Austin, Texas 78768-4263			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Officeholder		Description TCDP Donation		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 09/15/2025		Payee name Travis County Democratic Party			
Amount (\$) 84.00		Payee address; City; State; Zip Code PO Box 684263 Austin, Texas 78768-4263			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Officeholder		Description TCDP Donation		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>3</b>	<b>2</b> FILER NAME Shenghao "Daniel" Wang	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 10/14/2025	<b>5</b> Payee name Travis County Democratic Party	
<b>6</b> Amount (\$) <b>84.00</b>	<b>7</b> Payee address; City; State; Zip Code PO Box 684263 Austin, Texas 78768-4263	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Officeholder	<b>(b)</b> Description TCDP Donation
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. <span style="float:right;">Check if Austin, TX, officeholder living expense</span>	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right;">Office held</span>
Date 11/14/2025	Payee name Travis County Democratic Party	
Amount (\$) <b>84.00</b>	Payee address; City; State; Zip Code PO Box 684263 Austin, Texas 78768-4263	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Officeholder	Description TCDP Donation
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right;">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right;">Office held</span>
Date 12/15/2025	Payee name Travis County Democratic Party	
Amount (\$) <b>84.00</b>	Payee address; City; State; Zip Code PO Box 684263 Austin, Texas 78768-4263	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Officeholder	Description TCDP Donation
	Check if travel outside of Texas. Complete Schedule T. <span style="float:right;">Check if Austin, TX, officeholder living expense</span>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought <span style="float:right;">Office held</span>

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**