CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction G	uide explains how	to complete this form.	1 Filer ID (Ethics Commission	Hers) 2 Tota	il pages filed	18
3 CANDIDATE / OFFICEHOLDER NAME	Ms/MRs/MR Ms	Sarah	M: L		OFFICEU	SEONLY
NAIVIE:	NICKNAME	Sorensen	SUFFIX	Date Re	ceived	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	AUURESS / PO BOX		chy: State: ZP CO an Antonio TX 7821	1		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (518) 46	PHONE NUMBER 9-6884	EXTENSION			r Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR MS	Rachel	MI. L	Keceipt Uate Pro		Amount \$
	NICKNAME	Sorensen	SUFFD	Date Im	aged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	439 Queen A	NO PO BOX PLEASE).	CHY, San Antoni	0	SIAIE;	78209
8 CAMPAIGN TREASURER PHONE	AREA CODE (210) 243	PHONE NUMBER	EXTENSION			
9 REPORT TYPE	January 15 July 15	30th day before e	action Exceeded Mod	4 1	15th day after treasurer appr (Officeholder (Final Report (pintment
10 PERIOD COVERED	Month 3	Day Year / 22 / 2021	Reporting Limit	Month Day	Year 2021	
11 ELECTION	Month Day	Year Primary 2021 X General	Runott Other Descri			
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT SAISD Board of		District 1	mannen men en fan fan fan Stad Magende generaam en fan troch (SEE) (SEE) gesk ûn oanser men en fan fan SEE
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE ! OFFIC	AND OFFICEHOLDERS ARE REQUI	ACCEPTED OR POLITICAL EXPENDIT S MAY HAVE BEEN MADE WITHOUT T RED TO REPORT THIS INFORMATION O	HE CANDIDATE'S OR DNLY IF THEY RECEN	OFFICEHOLDE E NOTICE OF 5	DIE VMOMEENCE OD
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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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3	CANDIDATE / OFFICEHOLDER	MS / MRS / MR MS	FIRST Sarah	MI L	OFFICE	USEONLY
	NAME	NICKNAME Sorensen	LASI	SUFFIX	** Date Received	
•	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	API / SUILE #, (CHY; STATE; ZIP CODE		
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6	CAMPAIGN	MS / MRS / MR	FIRST	MI		Amount \$
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********	Residence or Business)					
8	CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXIENSION		
9	REPORT TYPE	January 15	30th day before e	election Runoff	15th day aft treasurer ap (Officeholde	
		July 15	8th day before ek	ection Exceeded Modified Reporting Limit	Final Repor	(Attach C/OH - FR)
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14	NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	EHOLDER. <i>THESE EXPENDITURE</i>	ACCEPTED OR POLITICAL EXPENDITURE S MAY HAVE BEEN MADE WITHOUT THE C RED TO REPORT THIS INFORMATION ONLY	'ANDIDATE'S OR OFFICEHOL	DER'S KNOWLEDGE OR
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20	and the same of th	X GENERAL	COMMITTEE AUDRESS			TO DESCRIPTION OF THE PROPERTY
	X Additional Pages		912 Highway 183 S	outh, Suite 100-A Austin,	TX 78741	
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and decrease			912 Highway 183 S	South, Suite 100-A Austin	, TX 78741	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction (Guide explains how	to complete this form.	1 Filer ID (Ethics Commission File	2 Total pages filed
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MS	Sarah	L MI	OFFICE USE ONLY
3 NE 18 V S Seen.	NICKNAME	Sorensen	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADURESS / PO BOX	API / SUILE #;	CHY; STATE; ZIP CODE	
5 CANDIDATE/	AREA COUE	F-34_27*\0.42.		
OFFICEHOLDER PHONE	()	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRS1	Mi	Receipt # Amount \$
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	NICKNAME	LASI	SUFFIX	
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7 CAMPAIGN TREASURER ADDRESS	SIREEI ADDRESS	(NO PO BOX PLEASE), API / S	CHY:	STATE, ZIP COUE
(Residence or Business)				
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXIENSION	
9 REPORT TYPE	January 15	30th day before e	election [] Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	July 15	8th day before ele	ection Exceeded Modifie Reporting Limit	
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12 OFFICE	OFFICE HELLI (if any)		13 OFFICE SOUGH) (if k	nown)
14 NOTICE FROM POLITICAL COMMITTEE(S)	: INC CANUSDAIC / UTTR	ENULUER PRESE EXPENDITIBLE	S MAY HAVE REEN MADE WITHOUT THE	S MADE BY POLITICAL COMMITTEES TO SUPPORT CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.
	COMMITTEE TYPE	CWA- Committee o	n Political Education Poli	ical Contributions Account
Additional Pages	X GENERAL	COMMITTEE ADDRESS 501 Third St. N.W.	Washington, DC 20001	очения видентический подавлений общений видентический видентиче
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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

15 C/OH NAME Ms Sarah L Sore	nsen	16 Filer II	D (Ethics Commission Filers)				
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$				
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 7815.00				
EXPENDITURE TOTALS	TOTAL UNITEMIZED POLITICAL EXPENDITURE.		\$				
	4. TOTAL POLITICAL EXPENDITURES		\$ 933.87				
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY	\$ 1505.62				
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	FTHE	\$				
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Signature of Candidate or Officeholder							
	Please complete either option below	v:					
(1) Affidavit							
NOTARY STAMP/SEA							
	before me by this the which, witness my hand and seal of office.	minospecifici identigratus propriopura eponetrum	day of,				
Signature of officer administe	ring oath Printed name of officer administering oath		Title of officer administering oath				
	OR						
(2) Unsworn Declarati	on						
	h Sorensen and my date of birth is Caroling St San Antonio. T	3/2	1978				
Executed in Bey-Cu	(city) (city) (city) (county, State of Texas, on the 23 day of Apr		zip code) (country) _, 20 <u>a \</u> _(year)				

SUBTOTALS - C/OH

19	19 FILERNAME 20 Filer ID (Ethics Cor						
Ms	Ms Sarah L Sorensen						
		LE SUBTOTALS FSCHEDULE	од на постоя од од од од от од от од		SUBTOTAL AMOUNT		
1.	[X]	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,750.00		
2.	X	SCHEDULEA2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	6,065.00		
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS				accumum pulpulan in est a manifesta est a mani		
4.		SCHEDULE E: LOANS					
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			933.87		
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	на учени в в почения	\$			
7.	- CONTRACTOR OF THE PROPERTY O	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS					
8.	Annual Property of the Parket	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD					
9.		SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS					
10.	Locusida	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH					
11.	lance and the second	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	ONTRIBUTIONS	\$	ng the film of the state of the		
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER				annangangenegasakan kanpangan penangan penangan penangan penangan penangan penangan penangan penangan penangan		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

Ms Sarah L		enne ste est skannosking kankanska enderne e est sagnoka ya san ya saka saka saka		3 Filer ID (Ethics Commission Filers)	
Date 4/1/21	5 Full name of contributor Samuel Durandard		(10#)	7 Amount of contribution (\$) 50.00	
	6 Contributor address; 311 Carnahan	City;	State; Zip Code		
Principal occ Financial A	cupation / Job title (See Instructions)		9 Employer (See Instruct USAA	ions)	
Date	Full name of contributor	Out-of-state PAC		Amount of contribution (\$)	
4/7/21	James Courtney		P. C. Calabrica		
	Contributor address;		State; Zip Code	10.00	
	707 W Russell Pl	San Antoni	o, TX 78212		
	upation / Job title (See Instructions)		Employer (See Instruct	fons)	
Teacher		Incarnate Word I		niversity	
Date	Full name of contributor Maddie Kennedy	Out-of-state PAC (ID#)		Amount of contribution (\$)	
4/7/21	Contributor address;	City;	State; Zip Code	25.00	
	405 Florida St Apt 1	San Antoni	o, TX 78210		
Principal occupation / Job title (See Instructions) Case Manager			Employer (See Instruct Thrive Youth Cent		
Date 4/7/21	Full name of contributor Cherise Rohr-Allegrini	Out-of-state PAC	(IU#:)	Amount of contribution (\$)	
4///21	Contributor address;	City;	State; Zip Code	100.00	
	133 Devine St	San Antonio,	TX 78210		
Principal occ	supation / Job title (See Instructions)		Employer (See Instruct	ions)	
			San Antonio AIDS Foundation		

MONETARY PÓLITICAL CONTRIBUTIONS

SCHEDULE A1

The	Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 3	
2 FILER NAME Ms Sarah L S	Sorensen			3 Filer ID (Ethics Commission Filers)	
4 Date 5 Full name of contributor out-ot-state PAC (ID#) Riley Metcalfe		The state of the s	7 Amount of contribution (\$) 100.00		
7/1/21	6 Contributor address; 706 Lovera Blvd	City; San Anto	State; Zip Code nio, TX 78212		
8 Principal occu Teacher	pation / Job title (See Instructions)	o ISD			
Date	Full name of contributor Judy Ranney	Asseption	(ID#:)	Amount of contribution (\$)	
4/8/21	Contributor address;	City;	State; Zip Code	25.00	
	11806 Song St	San Anto	nio, TX 78216		
Principal occupation / Job title (See Instructions) Not Employed			Employer (See Instruct	ions)	
Date	Full name of contributor		÷ (1U#)	Amount of contribution (\$)	
4/9/21					
	Contributor address;	City;	diam's	15.00	
	2508 Tampico St	San Anto	nio, TX 78207		
Principal occup Not Emplo	pation / Job title (See Instructions) yed		Employer (See Instruct N/A	tions)	
Date	Full name of contributor Samuel Durandard	Out-of-state PAC	(IU#)	Amount of contribution (\$)	
4/10/21	Contributor address;	City;	State; Zip Code	50.00	
	311 Carnahan	San Anton	io, TX 78209		
Principal occupation / Job title (See Instructions) Financial Analyst			Employer (See Instructions) USAA		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The	Instruction Guide explains how	to complete this	form.		1 To	otal pages Schedule A1:
2 FILER NAME Ms Sarah	L Sorensen				3 Fi	ler ID (Ethics Commission Filers)
4 Date	5 Full name of contributor Janice and Albert Clayton		- 11-01-1-01-01-01-01-01-01-01-01-01-01-01		7 A	mount of contribution (\$)
4/14/21 6 Contributor address; City; State; Zip Code 2420 McCullough Ave, Apt 202 San Antonio TX 78212					2	00.00
8 Principal occup	pation / Job title (See Instructions)		9 Empl	oyer (See Instruc	dions)	
Date	Full name of contributor Samuel Durandard	Out-of-state PAC			A	mount of contribution (\$)
4/14/21	Contributor address;	City;			Andria de Martina de Carlos de	150.00
Section and American	311 Carnahan St	San Antonio	о Т	X 78209	opymony de grapital de production de product	
Principal occup Financial An	ation / Job title (See Instructions) aylst		Empl USA	oyer (See Instruc	ctions)	
Date	Full name of contributor Katy Bravenec	out-of-state PAC (ID#)		P	Amount of contribution (\$)	
4/18/21	Contributor address; City; State; Zip Contributor				25.00	
	501 Shook Ave	SAN ANTO	NIO T	X 78212		
Principal occup Organizer	pation / Job title (See Instructions)		Employer (See Instructions) Collective Campaigns			
Date 4/22/21	Full name of contributor CWA- COPE PCC	X out-of-state PAC	(IU#. <u>C00</u>	002089	A	Amount of contribution (\$)
4/22/21	Contributor address;	City;	State;	Zip Code	and a graduate and a second	1000.00
	501 3rd St, NW	Washington	DC	20001		
Principal occup	pation / Job title (See Instructions)		Empl	oyer (See Instru	ctions)	
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SCHEDULE A2

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Т	he Instruction Guide explains	how to complete this form		1 Total pages Sched	ule A2: 7
2 FILER NAM Ms Sarah	L Sorensen			3 Filer ID (Ethics Co	mmission Filers)
4 TOTAL C	OF UNITEMIZED IN-KIND	POLITICAL CONTRIB	BUTIONS	\$ 0	00000000000000000000000000000000000000
5 Date	6 Full name of contributor San Antonio Alliance of	Out-of-state PAC (ID#:	Personnel P	8 Amount of AC Contribution \$	9 In-kind contribution description
3/24/21	7 Contributor address;	City; State;	Zip Code	4.00	Phone bank expense
	120 Adams St	San Antonio, TX 7	,	Check if travel outs	de of Texas, Complete Schedule T.
10 Principal oc	cupation / Job title (FOR NON-J	UDICIAL)(See Instructions)	11 Employ	er (FOR NON-JUDICI	AL)(See Instructions)
12 Contributor's	s principal occupation (FOR JUI	DICIAL)	13 Contrib	utor's job title (FOR JU	DICIAL)(See Instructions)
14 Contributor's	s employer/law firm (FOR JUDIO	CIAL)	15 Law fim	n of contributor's spou	se (if any) (FOR JUDICIAL)
16 If contributo	or is a child, law firm of parent(s) Full name of contributor	(if any) (FOR JUDICIAL) ☐ out-of-state PAC (iD#		Amount of	In-kind contribution
	San Antonio Alliance of T	eachers and Support P	ersonnel P	Cantilastina	description
3/24/21	Contributor address; 121 Adams St	City; State; San Antonio, TX 78		55.00 Check if travel outs	Campaign Literature de of Texas. Complete Schedule T.
Principal oo	cupation / Job title (FOR NON-J	UDICIAL) (See Instructions)	Employ	er (FOR NON-JUDICI	AL)(See Instructions)
Contributor	s principal occupation (FOR JUI	DICIAL)	Contrib	utor's job title (FOR JU	JDICIAL)(See Instructions)
Contributor'	s employer/law firm (FOR JUDIO	CIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributo	or is a child, law firm of parent(s)	(if any) (FOR JUDICIAL)			
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4 TOTAL C	F UNITEMIZED IN-KIND	POLITICAL CONTRIB	BUTIONS	\$ 0	овор 97 годин от на возграние от 1974 глуп и возголова до тредного на когдо 1944 годо, е учиственно возголова	
5 _{Date}	6 Full name of contributor San Antonio Alliance of T	out-of-state PAC (ID#:	Personnel P	8 Amount of AC Contribution \$	9 In-kind contribution description	
3/20/21	7 Contributor address;	City; State;	Zip Code	9.47	Campaign Lit paper	
	121 Adams St	San Antonio, TX 78	3210	Check if travel outsi	t de of Texas. Complete Schedule T.	
10 Principal oc	cupation / Job title (FOR NON-J	UDICIAL)(See Instructions)	11 Employe	FOR NON-JUDICI	AL)(See Instructions)	
12 Contributor's	s principal occupation (FOR JUD	IICIAL)	13 Contribu	utor's job title (FOR JU	IDICIAL)(See Instructions)	
14 Contributor's	s employer/law firm (FOR JUDIC	IAL)	15 Law fim	of contributor's spou	se (if any) (FOR JUDICIAL)	
16 If contributo	r is a child, law firm of parent(s) ((if any) (FOR JUDICIAL)		теритирин канада такан такан жана жана жана жана жана жана жана		
Date	Full name of contributor San Antonio Alliance of T	out-of-state PAC (ID#	Personnel P	Amount of Contribution \$	In-kind contribution description	
3/31/21	Contributor address; 121 Adams St	City; State; San Antonio, TX 78	Zip Code	4.00	Phone bank	
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r mopai od	cupation / 300 title (FOR NON-30	ODICIAL) (See Instructions)	Employe	er (FOR NON-JUDICI	AL)(See Instructions)	
Contributor's	s principal occupation (FOR JUD	PICIAL)	Contributor's job title (FOR JUDICIAL)(See Instructions)			
Contributor's	s employer/law firm (FÓR JUDIC	HAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
If contributo	r is a child, law firm of parent(s)	(if any) (FOR JUDICIAL)				

SCHEDULE A2

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2 FILER NAM Ms Sarah L			3 Filer ID (Ethics Co	mmission Filers)
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5 Date	6 Full name of contributor out-ot-state PAC (IU#:	OPE 1)	8 Amount of Contribution \$	9 In-kind contribution description
3/31/21	7 Contributor address; City; State;	Zip Code	1372.49	Digital ads
	912 Highway 183 South, Ste 110A Austin, TX	78741	Check if travel outsi	de of Texas. Complete Schedule T.
10 Principal occ	cupation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employe	r (FOR NON-JUDICI/	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	tor's job title (FOR JU	DICIAL)(See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	of contributor's spou	se (if any) (FOR JUDICIAL)
16 If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	American anterior common control control de displación de del control de del de del control comprese		
Date	Full name of contributor		Amount of Contribution \$	In-kind contribution
4/1/21	San Antonio Alliance of Teachers and Support P	ersonnel P	AC 1732,54	description
	Contributor address; City; State;	Zip Code	1732,34	Field Direction
	121 Adams St San Antonio, TX 78	210	Check if travel outsi	de of Texas. Complete Schedule T.
Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	r (FOR NON-JUDICI)	AL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL)(See Instructions)		
Contributor's	s employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
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2 FILER NAMI Ms Sarah L S				3 Filer ID (Ethics Co	mmission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIN	ID POLITICAL CONTRIE	BUTIONS	\$ 0		
5 Date 6 Full name of contributor out-ot-state PAC (IU#) { San Antonio Alliance of Teachers and Support Personnel PAC				9 In-kind contribution description		
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no debina espain de altra de actual que en comben promo de espain actual actual para actual que en comprese de	121 Adams St	San Antonio, TX 782	210	Check if travel outsi	de of Texas. Complete Schedule T.	
10 Principal occ	upation / Job title (FOR NON	-JUDICIAL)(See Instructions)	11 Employe	er (FOR NON-JUDICIA	AL)(See Instructions)	
12 Contributor's	principal occupation (FOR JU	JDICIAL)	13 Contribu	utor's job title (FOR JU	DICIAL)(See Instructions)	
14 Contributor's	employer/law firm (FOR JUD	ICIAL)	15 Law firm	of contributor's spou	se (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor	Out-of-state PAC (IU#		Amount of	In-kind contribution	
4/6/21	San Antonio Alliance of	Teachers and Support P	ersonnel P	AC Contribution \$	description	
4/0/21	Contributor address; 121 Adams St	City; State; San Antonio, TX 782	Zip Code	391.50	Campaign literature	
Drinal an				The second secon	de of Texas. Complete Schedule T.	
ringpai occ	upation / Job title (FOR NON	-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIA	AL)(See Instructions)	
Contributor's	principal occupation (FOR JU	JDICIAL)	Contributor's job title (FOR JUDICIAL) (See Instructions)			
Contributor's	employer/law firm (FOR JUD	ICIAL)	Law fim	of contributor's spou	se (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s	s) (if any) (FOR JUDICIAL)		остоборя в нем на		
			errorente (1 - 10 et al.) e per proportion de la companya esta de la companya esta de la companya esta de la c La companya esta de la companya			

SCHEDULE A2

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2: 7			
2 FILER NAME Ms Sarah L Sorensen				3 Filer ID (Ethics Commission Filers)		
4 TOTAL O	F UNITEMIZED IN-KINI	D POLITICAL CONTRIE	BUTIONS	\$ 0		
5 Date	6 Full name of contributor		8 Amount of Contribution \$ AC	9 In-kind contribution description		
4/14/21	7 Contributor address;	City; State;	Zip Code	10.00	Election data	
	121 Adams St	San Antonio, TX 78	210	Check if travel outsi	ide of Texas. Complete Schedule T.	
10 Principal occ	cupation / Job title (FOR NON-,	JUDICIAL)(See Instructions)	11 Employe	er (FOR NON-JUDICI	AL)(See Instructions)	
12 Contributor's	principal occupation (FOR JU	DICIAL)	13 Contribu	itor's job title (FOR JU	JDICIAL)(See Instructions)	
14 Contributor's	s employer/law firm (FOR JUDI	CIAL)	15 Law fim	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor	r is a child, law firm of parent(s)	(if any) (FOR JUDICIAL)		NYTOTA NI SILATONI SILATONI ALTONI		
Date	Full name of contributor	Out-of-state PAC (IU#) Jorgannal D	Amount of Contribution \$	In-kind contribution description	
4/15/21	San Antonio Alliance of Teachers and Support Personnel Contributor address; City; State; Zip Code			23.10	Phone bank	
	121 Adams St San Antonio, TX 78210		3210	Check if travel outsi	lide of Texas. Complete Schedule T.	
Principal occ	cupation / Job title (FOR NON-	JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICI	AL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)				
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)				
If contributo	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			TO THE COMMON PORT OF THE STATE	
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SCHEDULE A2

11	ne Instruction Guide explains how to complete this form		1 Total pages Schedule A2: 7	
2 FILER NAME Ms Sarah L Sorensen			3 Filer ID (Ethics Commission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$	unum (m. 1904) et par et sand et se en
5 Date 4/16/21	6 Full name of contributor	Zip Code	8 Amount of Contribution \$ 533.14	9 In-kind contribution description Paid phones
nterminate de la companya de la com	912 Highway 183 South, Ste 110A Austin	TX 78741	Check if travel outsi	de of Texas. Complete Schedule T.
	supation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employe	er (FOR NON-JUDICI)	AL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JU	DICIAL)(See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 4/19/21	Full name of contributor			In-kind contribution description
	Contributor address; City; State;	Zip Code	404.86	Campaign literature
	121 Adams St San Antonio, TX 7	8210	Check if travel outside	de of Texas. Complete Schedule T.
Principal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICI)	AL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL)(See Instructions)		IDICIAL)(See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)		se (if any) (FOR JUDICIAL)
If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
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SCHEDULE A2

TI	he Instruction Guide explains how to complete this for		1 Total pages Sched	ule A2 ⁻ 7	
2 FILER NAME Ms Sarah L Sorensen			3 Filer ID (Ethics Commission Filers)		
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRI	BUTIONS	\$	от даме в в 1 т запру от уденици в вод и в на	
5 Date	6 Full name of contributor out-of-state PAC (ID# Texas AFT Committee on Political Education (COPE 1)	8 Amount of Contribution \$	9 In-kind contribution description	
4/19/21	7 Contributor address; City; State:	Zip Code	1451.75	Direct Mail	
		TX 78741	Check if travel outsi	l de of Texas. Complete Schedule T.	
10 Principal occ	cupation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employe	er (FOR NON-JUDICIA	AL)(See Instructions)	
12 Contributor's	s principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JU	DICIAL)(See Instructions)	
14 Contributor's	s employer/law firm (FOR JUDICIAL)	15 Law fim	firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		з заходительного за 1914 година у пречина до настрой за 1914 година и надвижения под 1915 година и надвиж		
Date	Full name of contributor		Amount of Contribution \$	In-kind contribution description	
4/20/21			29.40	Phone bank	
	120 Adams St San Antonio, TX 78	Check if travel outsi	de of Texas. Complete Schedule T.		
Principal occ	cupation / Job title (FOR NON-JUDICIAL)(See Instructions)	Employe	er (FOR NON-JUDICI)		
Contributor's	s principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL)(See Instructions)			
Contributor's	s employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	The second secon	од боло в водот на стояне доод отнучение на стояне достой страстой до в на негоривание негоривание на страстой страстой достой достой до негоривание негоривание на страстой достой дост		
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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)

AdvertIsting Expense
Accounting/Banking
Consulting Expense
Contitbutions/Directions Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense GIIT/Awards/Memorials Expense Lenat Services Loan Repayment/Relinbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarles/Wages/Contract Labor

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

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	ove)		
1 lotal pages Schedule F1:	FILER NAME Ms Sarah L Sorensen	3 Filer ID (Ethics Commission	Filers)		
4 Date 3/26/21	5 Payee name Taco Cabana		(PERIO) PARES (PROSES) A de many est esconomo monograp		
6 Amount (\$)	7 Payee address;	City; State; Zip Code			
23.21	2908 Broadway	San Antonio, TX 78209			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF	Food/Beverage	Tacos for canvass volunteers			
EXPENDITURE					
	(c) Check if travel outside of Texas. Complete Schedule I.	Check if Austin, ±X, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/Or	Candidate / Officeholder name	Office sought Office held			
Date	Payee name				
3/28/21	The Home Depot				
Amount (\$)	Payee address;	City; State; Zip Code	3		
19.46	527 Fair Ave	San Antonio, TX 78223			
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Advertising	Zip ties for campaign signs			
	Check if travel outside of lexas. Complete Schedule 1.	Check if Austin. TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought Office held	managaganat tahtirnan atap migamakalan ya mayangan		
Date	Payee name				
4/1/21	ActBlue				
Amount (\$)	Payee address;	City; State; Zip Code	6		
11.25	PO Box 441146	Somerville, MA 02144-0031			
роння от технология вогология по том учений в под менерований предоставлений под	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Fundraising	Service fee for donation website			
	Check if travel outside of lexas. Complete Schedule 1.	Check if Austin, TX, officeholder living expense	эний регентийн үүн частый каланаат таар уудагаа ан араа		
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought Office held	edecideli recolorium produmental desprenomento di secolorium del desprenomento di secolorium del desprenomento di secolorium del desprenomento di secolorium del del secolorium d		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gttt/Awards/Memorials Expense Legal Services Loan Repayment/Relinbursement Office Overhead/Rental Expense Polling Expense Pfinting Expense Salaties/Wages/Contract Labor Solicitation/Fundraising Expense Fransportation Equipment & Related Expense Fravel In District Fravel Out Of District Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	vans femer a carego	ily trocessess applye)	
1 lotal pages Schedule F1:	FILER NAME Ms Sarah L Sorensen		3 Filer ID (Ethics	Commission Filers)	
4 Date 4/2/21	5 Payee name Taco Cabana		elevania en	(KSQMS-000-000-000-000-000-000-000-000-000-0	
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code	
21.60	2908 Broadway	San Antonio, TX 78209			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	те типе на технически по менени по село до на настраните и по на технически по на технически по подраждува и при по	e menere personal de la processa de	
PURPOSE OF EXPENDITURE	Food/Beverage	Tacos for canvass volunteers			
	(c) Check if travel outside of Texas. Complete Schedule 1.	Check if Aust	in, IX, officeholder living	expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held	
Date	Payee name			оборожно применения в применения в под при В применения в применен	
4/9/21	Taco Cabana				
Amount (\$)	Payee address;	City;	son a constitutive	Zip Code	
19.98	2908 Broadway	San Antonio, TX 78209			
and the second of the second second second dependent and the second seco	Category (See Categories listed at the top of this schedule)	Description	and the state of t	er Falle Andre British (1904) (1904) is the second material and the second seco	
PURPOSE OF EXPENDITURE	Food/Beverage	Tacos for ca	anvass voluntee	ers	
	Check if travel outside of lexas. Complete Schedule 1.	Check if Austin. 1X, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	goggege, g.e.; et amoutus de l'écone manige à ministère le le maneux et des constitutes	Office held	
Date	Payee name				
4/16/21	Taco Cabana				
Amount (\$)	Payee address;	City,	State;	Zip Code	
18.37	2908 Broadway	San Anto	onio, TX 78209		
	Category (See Categories listed at the top of this schedule)	Description	The second secon	meren nema menahing (1990) bir (20) 1900 birkalah ini dajadi ini mari ajam mpira hina birga suwaga sabagi	
PURPOSE OF EXPENDITURE	Food/Beverage	Tacos for ca	anvass voluntee	rs	
	Check if travel outside of lexas. Complete Schedule 1.	Check if Aust	in, 1X, officeholder living	expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	nt ver eine ver vergen an der vereigt der den verste der vereigt verden verste der verste der verste der verst	Office held	

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Ornations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense GITI/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense Printing Expense Salantes/Wades/Contract Labor Solicitation/Fundraising Expense Fransportation Equipment & Related Expense Fravel In District Fravel Out Of District Other (enter a category not listed above)

Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	y GIT/Awards/Memorials Expense Print	Ing Expense Fravel Out Of District Ing Expense Gontract Labor Other (enter a category not listed above) v to complete this form.	
1 lotal pages Schedule F1:	2 FILER NAME Ms Sarah L Sorensen	3 Filer ID (Ethics Commission Filers)	perculation
4 Date 4/14/21	5 Payee name EN Mediaworks		PONULSI NE P
6 Amount (\$)	7 Payee address;	City; State; Zip Code	recessors
820.00	P.O. Box 2171	San Antonio, TX 78297	
8	(a) Category (See Categories listed at the top of this schedul	(b) Description	Signatures
PURPOSE OF EXPENDITURE	Advertising	Print ads	
	(c) Check if travel outside of lexas. Complete Schedule	Check if Austin, +X, officeholder living expense	noonelatyie
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held	B(p)-mint(s)-in
Date	Payee name		Participal Prompts
Amount (\$)	Payee address;	City; State; Zip Code	resinistrategos
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule	Description	************
	Check if travel outside of lexas. Complete Schedule	Check if Austin, TX, officeholder living expense	description (
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	10005494000
Date	Payee name		
Amount (\$)	Payee address;	City; State; Zip Code	(Semiliation w
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule	Description	indepledentations
	Check if travel outside of lexas. Complete Schedule	Check if Austin, TX, officeholder living expense	TOTAL PROPERTY.
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	номунаридов



CHRISTOPHER SHELTON, Chair SARA STEFFENS, Treasurer

CWA-COPE PCC 501 Third Street, N.W. Washington, DC 20001 Phone: 202.434.1491

Fax: 202.434.1279

Email: epolitics@cwa-union.org

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Dear Friends:

Enclosed is a check which is drawn on the CWA-Committee on Political Education Political Contributions Committee (CWA-COPE PCC) account.

CWA-COPE PCC is a federal multi-candidate political committee sponsored by the Communications Workers of America and is funded solely with voluntary contributions from CWA members and their families. CWA-COPE PCC is registered with, and periodically reports its transactions to, the Federal Election Commission (FEC).

Sincerely,

Christopher Shelton

Chair