

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

<b>The GPAC Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00084581	<b>2</b> Total pages filed: 58
<b>3</b> COMMITTEE NAME North Texas Conservative Coalition		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 07/16/2023	
<b>4</b> COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 5000 Eldorado Parkway Suite 150-129 Frisco, TX 75033		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
Date Imaged			
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Ms.	Bri	
NICKNAME		LAST	SUFFIX
		Loftis	
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2620 Pin Oak Ln. Plano, TX 75075		
	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 5000 El Dorado Parkway, Suite 150-129 Frisco, TX 75033		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	AREA CODE PHONE NUMBER EXTENSION (469) 583-2193		
	REPORT TYPE <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
<b>10</b> PERIOD COVERED	Month	Day	Year
	01	01	2023
THROUGH		Month	Day
		06	30
<b>11</b> ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special

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# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> North Texas Conservative Coalition	<b>13 Filer ID</b> (Ethics Commission Filers) 00084581
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b>	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 35,532.81
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 35,270.22
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 10,028.96
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

**16 AFFIDAVIT**

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

Ms. Bri Loftis  
\_\_\_\_\_  
Signature of Campaign Treasurer

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 oath      Printed name of officer administering oath      Title of officer administering oath

**SUBTOTALS - GPAC****FORM GPAC**  
**COVER SHEET PG 3**  
3 of 58

<b>17 COMMITTEE NAME</b> North Texas Conservative Coalition		<b>18 Filer ID</b> (Ethics Commission Filers) 00084581
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 35,532.81
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 35,270.22
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 1/31 Rpt: 4/58
2 FILER NAME North Texas Conservative Coalition		3 Filer ID (Ethics Commission Filers) 00084581
4 Date 05/08/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adeyemi, Adebayo (Mr.)	7 Amount of Contribution (\$) \$99.00
	6 Contributor address; City; State; Zip Code  Lewisville, TX 75067	
8 Principal occupation / Job title (See Instructions) Client Success Manager		9 Employer (See Instructions)
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adolf, Donald (Mr.)	Amount of Contribution (\$) \$99.00
	Contributor address; City; State; Zip Code  Frisco, TX 75033	
Principal occupation / Job title (See Instructions) Sr. Processor		Employer (See Instructions)
Date 01/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Biscan, Dianna (Ms.)	Amount of Contribution (\$) \$99.00
	Contributor address; City; State; Zip Code  Plano, TX 75024	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Boduch, Joseph (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Frisco, TX 75035	
Principal occupation / Job title (See Instructions) IT Solution Architect		Employer (See Instructions)
Date 04/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bohannon, Gary (Mr.)	Amount of Contribution (\$) \$99.00
	Contributor address; City; State; Zip Code  Celina, TX 75009	
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 2/31 Rpt: 5/58
2 FILER NAME North Texas Conservative Coalition		3 Filer ID (Ethics Commission Filers) 00084581
4 Date 03/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Burden, Brandon (Mr.)	7 Amount of Contribution (\$) \$99.00
	6 Contributor address; City; State; Zip Code  Frisco, TX 75033	
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions)
Date 01/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bussman, Don (Mr.)	Amount of Contribution (\$) \$164.00
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Telecommunications Professional		Employer (See Instructions)
Date 06/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Canright, Robert (Mr.)	Amount of Contribution (\$) \$99.00
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Author		Employer (See Instructions)
Date 03/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Christenson, Susan (Ms.)	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code  Plano, TX 75023	
Principal occupation / Job title (See Instructions) Mortgage Consultant		Employer (See Instructions)
Date 03/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cobb, Donna (Mrs.)	Amount of Contribution (\$) \$228.00
	Contributor address; City; State; Zip Code  Colleyville, TX 76034	
Principal occupation / Job title (See Instructions) Domestic		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/31 Rpt: 6/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 06/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) D'Aversa, Aldo (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75254	<b>7</b> Amount of Contribution (\$)  \$99.00
<b>8</b> Principal occupation / Job title (See Instructions) Chiropractor		<b>9</b> Employer (See Instructions)
Date 05/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dallas Jewish Conservatives <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75230	Amount of Contribution (\$)  \$132.81
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davis , Mary (Ms.) <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75035	Amount of Contribution (\$)  \$99.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flewelling, Mike (Mr.) <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$99.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Foley, Linda (Ms.) <hr/> Contributor address; City; State; Zip Code  Sherman, TX 75092	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Domestic		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/31 Rpt: 7/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 05/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gallo, Vince (Mr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Flower Mound, TX 75022	
<b>8</b> Principal occupation / Job title (See Instructions) Congressional Candidate		<b>9</b> Employer (See Instructions)
Date 06/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Giles, Laura (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Allen, TX 75002	
Principal occupation / Job title (See Instructions) Sr. Digital Strategist		Employer (See Instructions)
Date 03/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gregory, Laura (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Frisco, TX 75036	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hartoonian, Lennea (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Frisco, TX 75033	
Principal occupation / Job title (See Instructions) Domestic		Employer (See Instructions)
Date 03/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hatch, Pam (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Frisco, TX 75034	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/31 Rpt: 8/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 06/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hatch, Pam (Ms.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75034	<b>7</b> Amount of Contribution (\$)  \$140.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Heier, John (Mr.) <hr/> Contributor address; City; State; Zip Code  Plano, TX 75025	Amount of Contribution (\$)  \$99.00
Principal occupation / Job title (See Instructions) Trade Promotion Manager		Employer (See Instructions)
Date 05/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hensley, Debra (Ms.) <hr/> Contributor address; City; State; Zip Code  Cresson, TX 76035	Amount of Contribution (\$)  \$99.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hoefler, Randall (Mr.) <hr/> Contributor address; City; State; Zip Code  Plano, TX 75025	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Isaacs, Barbara (Ms.) <hr/> Contributor address; City; State; Zip Code  Fairview, TX 75069	Amount of Contribution (\$)  \$750.00
Principal occupation / Job title (See Instructions) Activist		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/31 Rpt: 9/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 04/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Sharon (Ms.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  The Colony, TX 75056	<b>7</b> Amount of Contribution (\$)  \$99.00
<b>8</b> Principal occupation / Job title (See Instructions) Pet Sitter		<b>9</b> Employer (See Instructions)
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kissee, Anita (Mrs.) <hr/> Contributor address; City; State; Zip Code  Krugerville, TX 76227	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Home Inspections		Employer (See Instructions)
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kollar, Will (Mr.) <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$99.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions)
Date 04/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Koons, Robert (Dr.) <hr/> Contributor address; City; State; Zip Code  Plano, TX 75025	Amount of Contribution (\$)  \$99.00
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions)
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kristi , Champagne (Ms.) <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75070	Amount of Contribution (\$)  \$99.00
Principal occupation / Job title (See Instructions) Customer Support Director		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 7/31 Rpt: 10/58
2 FILER NAME North Texas Conservative Coalition		3 Filer ID (Ethics Commission Filers) 00084581
4 Date 06/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamb, Mellany (Ms.)	7 Amount of Contribution (\$) \$99.00
	6 Contributor address; City; State; Zip Code  Flower Mound, TX 75022	
8 Principal occupation / Job title (See Instructions) Self-Employed		9 Employer (See Instructions)
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loftis, Bri (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loftis, Bri (Ms.)	Amount of Contribution (\$) \$99.00
	Contributor address; City; State; Zip Code  Plano, TX 75075	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) London, Dennis (Mr.)	Amount of Contribution (\$) \$114.00
	Contributor address; City; State; Zip Code  Rockwall, TX 75032	
Principal occupation / Job title (See Instructions) State Rep Candidate		Employer (See Instructions)
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marokus, Patricia (Ms.)	Amount of Contribution (\$) \$99.00
	Contributor address; City; State; Zip Code  Prosper, TX 75078	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/31 Rpt: 11/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 04/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maynard, Wanda (Ms.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Aubrey, TX 76227	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Dog Sitter		<b>9</b> Employer (See Instructions)
Date 02/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McAllister, Margie (Ms.) <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75072	Amount of Contribution (\$)  \$99.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 06/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miles, Delores (Ms.) <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75070	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Domestic		Employer (See Instructions)
Date 03/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Montes, John (Mr.) <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75071	Amount of Contribution (\$)  \$99.00
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions)
Date 03/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mossman, Fern (Ms.) <hr/> Contributor address; City; State; Zip Code  Prosper, TX 75078	Amount of Contribution (\$)  \$99.00
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/31 Rpt: 12/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 02/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Noyes, Patti (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Bridgeport, TX 76426	
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions)
Date 03/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Obrien, Karen (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Frisco, TX 75035	
Principal occupation / Job title (See Instructions) Senior Communications Manager		Employer (See Instructions)
Date 02/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patterson, Sheila (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Plano, TX 75025	
Principal occupation / Job title (See Instructions) Sales Representative		Employer (See Instructions)
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pendery, Darlene (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Flower Mound, TX 75022	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pendery, David (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Flower Mound, TX 75022	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/31 Rpt: 13/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 06/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pezdek, Heidi (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Lorena, TX 76655	
<b>8</b> Principal occupation / Job title (See Instructions) Activist		<b>9</b> Employer (See Instructions)
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phillips, Larry (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Whitney, TX 76692	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rhymes, Tifphanie (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Lantana, TX 76226	
Principal occupation / Job title (See Instructions) Executive Administrator		Employer (See Instructions)
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ruble, Kathleen (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  The Colony, TX 75056	
Principal occupation / Job title (See Instructions) Domestic		Employer (See Instructions)
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seals, David (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Frisco, TX 75034	
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/31 Rpt: 14/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 04/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sellars, Jane (Ms.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75036	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seri, Lucila (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Arlington, TX 76012	
Principal occupation / Job title (See Instructions) Solution Architect		Employer (See Instructions)
Date 02/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Seri, Lucilla (Mrs.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Arlington, TX 76012	
Principal occupation / Job title (See Instructions) Solution Architect		Employer (See Instructions)
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sharp, Diana (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Dallas, TX 75252	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sibert, David (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  McKinney, TX 75071	
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/31 Rpt: 15/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 03/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sibert, Jacqueline (Mrs.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  McKinney, TX 75071	
<b>8</b> Principal occupation / Job title (See Instructions) Self-employed		<b>9</b> Employer (See Instructions)
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Charlotte, NC 28277	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Charlotte, NC 28277	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Charlotte, NC 28277	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Charlotte, NC 28277	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/31 Rpt: 16/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 01/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> <b>6</b> Contributor address; City; State; Zip Code  Charlotte, NC 28277	<b>7</b> Amount of Contribution (\$)  \$400.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$260.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/31 Rpt: 17/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 01/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius ..... <b>6</b> Contributor address; City; State; Zip Code  Charlotte, NC 28277	<b>7</b> Amount of Contribution (\$)  \$510.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius ..... Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius ..... Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius ..... Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$270.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius ..... Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/31 Rpt: 18/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 02/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius	<b>7</b> Amount of Contribution (\$) \$400.00
<b>6</b> Contributor address; City; State; Zip Code  Charlotte, NC 28277		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Charlotte, NC 28277		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code  Charlotte, NC 28277		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code  Charlotte, NC 28277		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Charlotte, NC 28277		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/31 Rpt: 19/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 03/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> <b>6</b> Contributor address; City; State; Zip Code  Charlotte, NC 28277	<b>7</b> Amount of Contribution (\$)  \$310.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 03/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/31 Rpt: 20/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 03/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> <b>6</b> Contributor address; City; State; Zip Code  Charlotte, NC 28277	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/31 Rpt: 21/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 03/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> <b>6</b> Contributor address; City; State; Zip Code  Charlotte, NC 28277	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/31 Rpt: 22/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 04/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> <b>6</b> Contributor address; City; State; Zip Code  Charlotte, NC 28277	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/31 Rpt: 23/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 05/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> <b>6</b> Contributor address; City; State; Zip Code  Charlotte, NC 28277	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$320.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$840.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$800.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/31 Rpt: 24/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 06/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> <b>6</b> Contributor address; City; State; Zip Code  Charlotte, NC 28277	<b>7</b> Amount of Contribution (\$) \$40.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 06/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Signupgenius <hr/> Contributor address; City; State; Zip Code  Charlotte, NC 28277	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Jeralee (Ms.) <hr/> Contributor address; City; State; Zip Code  Bonham, TX 75418	Amount of Contribution (\$) \$49.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$) \$53.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$) \$53.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/31 Rpt: 25/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 01/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94103	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$) \$53.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$) \$265.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/31 Rpt: 26/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 02/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94103	<b>7</b> Amount of Contribution (\$)  \$53.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 03/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$160.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$80.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$53.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/31 Rpt: 27/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 03/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94103	<b>7</b> Amount of Contribution (\$)  \$106.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 03/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$120.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/31 Rpt: 28/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 03/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94103	<b>7</b> Amount of Contribution (\$)  \$212.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 03/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$53.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/31 Rpt: 29/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 04/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94103	<b>7</b> Amount of Contribution (\$)  \$60.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 04/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$105.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/31 Rpt: 30/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 04/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94103	<b>7</b> Amount of Contribution (\$)  \$75.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 04/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/31 Rpt: 31/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 04/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94103	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$130.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$541.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$110.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$99.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/31 Rpt: 32/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 06/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94103	<b>7</b> Amount of Contribution (\$)  \$40.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 06/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sudomir, Monica (Ms.) <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75033	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Sr. Transition Manager		Employer (See Instructions)
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Wendy (Ms.) <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75034	Amount of Contribution (\$)  \$124.00
Principal occupation / Job title (See Instructions) New Home Sales		Employer (See Instructions)
Date 02/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tipton, Melissa (Ms.) <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75035	Amount of Contribution (\$)  \$99.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 04/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Travis, Michelle (Ms.) <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75034	Amount of Contribution (\$)  \$99.00
Principal occupation / Job title (See Instructions) Self-employed		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/31 Rpt: 33/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 03/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trevithick, Grant (Mr.)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Carrollton, TX 75006	
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Investor		<b>9</b> Employer (See Instructions)
<b>Date</b> 05/01/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tucker, Kelly (Ms.)	<b>Amount of Contribution (\$)</b> \$99.00
	<b>Contributor address; City; State; Zip Code</b>  Midwest City, OK 73130	
<b>Principal occupation / Job title (See Instructions)</b> Self-Employed		<b>Employer (See Instructions)</b>
<b>Date</b> 03/24/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wamhoff, Patrick (Mr.)	<b>Amount of Contribution (\$)</b> \$515.00
	<b>Contributor address; City; State; Zip Code</b>  Frisco, TX 75036	
<b>Principal occupation / Job title (See Instructions)</b> International Business Sr. Account Executive		<b>Employer (See Instructions)</b>
<b>Date</b> 04/11/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wentrobe, Dale (Mr.)	<b>Amount of Contribution (\$)</b> \$99.00
	<b>Contributor address; City; State; Zip Code</b>  Lantana, TX 76226	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>
<b>Date</b> 03/28/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whitt, Maggie (Ms.)	<b>Amount of Contribution (\$)</b> \$15.00
	<b>Contributor address; City; State; Zip Code</b>  Murphy, TX 75094	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/31 Rpt: 34/58
<b>2</b> FILER NAME North Texas Conservative Coalition		<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 03/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yuknavich, Deidre (Ms.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Keller, TX 76248	<b>7</b> Amount of Contribution (\$)  \$99.00
<b>8</b> Principal occupation / Job title (See Instructions) Nurse		<b>9</b> Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/24 Rpt: 35/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 04/28/2023	<b>5</b> Payee name AJL International	
<b>6</b> Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 5021 Statesman Dr  Irving, TX 75063	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bus rental for trip to Austin State Capital
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2023	Payee name AJL International	
Amount (\$) \$2,500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5021 Statesman Dr  Irving, TX 75063	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bus lease expense for trip to Austin State Capital 5.2.23
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/25/2023	Payee name Brand New Promotions	
Amount (\$) \$207.84  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7300 Lone Star Dr STE 200,  Plano, TX 75024	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Nametags for Meetings and Events
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/24 Rpt: 36/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
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<b>4</b> Date 03/20/2023	<b>5</b> Payee name Buc-Ee's
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<b>6</b> Amount (\$) \$31.26  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1550 Central Expressway  Melissa, TX 75454
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Trip to Austin State Capital
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/22/2023	Payee name Buc-Ee's
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Amount (\$) \$38.53  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4155 N General Bruce Dr  Temple, TX 76501
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Trip to Austin State Capital
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/16/2023	Payee name Buc-Ee's
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Amount (\$) \$41.24  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4155 N General Bruce Dr  Temple, TX 76501
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas on trip to Austin State Capital 5.16.23
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/24 Rpt: 37/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
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<b>4</b> Date 06/09/2023	<b>5</b> Payee name Buc-Ee's
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<b>6</b> Amount (\$) \$206.27  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1550 Central Expressway  Melissa, TX 75454
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Awards for Celebration Dinner
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/23/2023	Payee name Burden, Kathy (Mrs.)
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Amount (\$) \$407.25  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13064 Montfair Blvd  Frisco, TX 75033
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Van Rental, Tolls, Gas and Parking for Trip to Austin State Capital
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/18/2023	Payee name Burden, Kathy (Mrs.)
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Amount (\$) \$124.98  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13064 Montfair Blvd  Frisco, TX 75033
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Gas, tolls and parking on trip to Austin State Capital.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/24 Rpt: 38/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 03/23/2023	<b>5</b> Payee name Chase Bank	
<b>6</b> Amount (\$) \$15.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code P O box 182051  Columbus, OH 43218	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire fees for wire deposit
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/03/2023	Candidate/Officeholder name Click4Corp LLC	
Amount (\$) \$50.00  <input type="checkbox"/> Expenditure from corporate funds	Office sought 1151 Richardson Ct  Allen, TX 75002	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Website Hosting	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/01/2023	Candidate/Officeholder name Click4Corp LLC	
Amount (\$) \$50.00  <input type="checkbox"/> Expenditure from corporate funds	Office sought 1151 Richardson Ct  Allen, TX 75002	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Website Hosting	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting
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.

<b>1</b> Total pages Schedule F1: Sch: 5/24 Rpt: 39/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 03/01/2023	<b>5</b> Payee name Click4Corp LLC	
<b>6</b> Amount (\$) \$50.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1151 Richardson Ct  Allen, TX 75002	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Website Hosting	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/03/2023	Payee name Click4Corp LLC	
Amount (\$) \$50.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1151 Richardson Ct  Allen, TX 75002	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Website Hosting	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2023	Payee name Click4Corp LLC	
Amount (\$) \$50.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1151 Richardson Ct  Allen, TX 75002	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Website Hosting	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting
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                        | 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: Sch: 6/24 Rpt: 40/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 06/01/2023	<b>5</b> Payee name Click4Corp LLC	
<b>6</b> Amount (\$) \$50.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1151 Richardson Ct  Allen, TX 75002	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Website Hosting	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/07/2023	Candidate/Officeholder name Collin County GOP	
Amount (\$) \$1,500.00  <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Table Sponsorship for Collin county GOP Lincoln Dinner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/20/2023	Candidate/Officeholder name Dallas Jewish Conservatives	
Amount (\$) \$132.81  <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation for table sponsorship at event that was cancelled (reimbursed us in May)
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.

<b>1</b> Total pages Schedule F1: Sch: 7/24 Rpt: 41/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
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<b>4</b> Date 03/23/2023	<b>5</b> Payee name Enterprise Rent-A-Car
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<b>6</b> Amount (\$) \$285.20  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 8811 Teel Pkwy Suite 260 Frisco, TX 75034
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Van Rental for Trip to Austin State Capital
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/30/2023	Payee name Enterprise Rent-A-Car
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Amount (\$) \$42.21  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8811 Teel Pkwy Suite 260 Frisco, TX 75034
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tolls for Van Trip to Austin State Capital
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/19/2023	Payee name Eztexting.com
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Amount (\$) \$372.25  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1410 Second St STE 200  Santa Monica, CA 90406
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mass texts for Meetings and Events
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/24 Rpt: 42/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 02/13/2023	<b>5</b> Payee name Eztexting.com	
<b>6</b> Amount (\$) \$104.73  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1410 Second St STE 200  Santa Monica, CA 90406	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mass texts for Meetings and Events
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/21/2023	Payee name Eztexting.com	
Amount (\$) \$26.65  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1410 Second St STE 200  Santa Monica, CA 90406	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mass texts for Meetings and Events
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/20/2023	Payee name Eztexting.com	
Amount (\$) \$26.65  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1410 Second St STE 200  Santa Monica, CA 90406	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mass texts for Meetings and Events
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/24 Rpt: 43/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 04/19/2023	<b>5</b> Payee name Eztexting.com	
<b>6</b> Amount (\$) \$26.65  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1410 Second St STE 200  Santa Monica, CA 90406	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mass texts for Meetings and Events
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/19/2023	Payee name Eztexting.com	
Amount (\$) \$26.65  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1410 Second St STE 200  Santa Monica, CA 90406	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mass texts for Meetings and Events
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/20/2023	Payee name Eztexting.com	
Amount (\$) \$26.65  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1410 Second St STE 200  Santa Monica, CA 90406	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mass texts for Meetings and Events
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/24 Rpt: 44/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 04/10/2023	<b>5</b> Payee name Givesendgo.com	
<b>6</b> Amount (\$) \$101.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 8 The Grn Suite A Dover, DE 19901	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation toward Shelley Luther's hospital expenses.
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/06/2023	Payee name Go Daddy	
Amount (\$) \$40.34  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 14455 Hayden Road  Scottsdale, AZ 85260	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Subscriptions	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain name Renewal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/27/2023	Payee name Go Daddy	
Amount (\$) \$20.17  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 14455 Hayden Road  Scottsdale, AZ 85260	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Subscriptions	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain Name Renewal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/24 Rpt: 45/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 03/21/2023	<b>5</b> Payee name Go Daddy	
<b>6</b> Amount (\$) \$92.68  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 14455 Hayden Road  Scottsdale, AZ 85260	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Subscriptions	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain Name Purchase
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 03/23/2023	Payee name Go Daddy	
Amount (\$) \$23.17  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 14455 Hayden Road  Scottsdale, AZ 85260	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Subscriptions	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain Name Renewal
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 03/24/2023	Payee name Go Daddy	
Amount (\$) \$213.01  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 14455 Hayden Road  Scottsdale, AZ 85260	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Subscriptions	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain Name Purchases
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/24 Rpt: 46/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
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<b>4</b> Date 04/11/2023	<b>5</b> Payee name Go Daddy
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<b>6</b> Amount (\$) \$4.17	<b>7</b> Payee address; City; State; Zip Code 14455 Hayden Road Scottsdale, AZ 85260
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Subscriptions	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Domain Name Purchase
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/10/2023	Payee name Lone Star Coaches
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Amount (\$) \$2,632.00	Payee address; City; State; Zip Code 2425 Houston St Grand Prairie, TX 75050
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Expenditure from corporate funds

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lease Expense for 1 bus for trip to Austin State Capital
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/22/2023	Payee name Lone Star Coaches
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Amount (\$) \$2,632.00	Payee address; City; State; Zip Code 2425 Houston St Grand Prairie, TX 75050
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Expenditure from corporate funds

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lease Expense for Bus Trip to Austin State Capital for 3.7.2023
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/24 Rpt: 47/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 03/29/2023	<b>5</b> Payee name Lone Star Coaches	
<b>6</b> Amount (\$) \$2,444.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2425 Houston St  Grand Prairie, TX 75050	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bus Lease Expense to Trip to Austin State Capital for 4.11.2023
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/06/2023	Payee name Lone Star Coaches	
Amount (\$) \$2,632.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2425 Houston St  Grand Prairie, TX 75050	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bus lease expense for trip to Austin State Capital for 4.18.23
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/10/2023	Payee name Lone Star Coaches	
Amount (\$) \$5,276.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2425 Houston St  Grand Prairie, TX 75050	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bus lease expense for 2 buses to Austin State Capital 4.25.2023
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/24 Rpt: 48/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 04/17/2023	<b>5</b> Payee name Lone Star Coaches	
<b>6</b> Amount (\$) \$2,444.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2425 Houston St  Grand Prairie, TX 75050	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bus lease expense for 4.25.23 trip to Austin State Capital
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/05/2023	Payee name MailChimp	
Amount (\$) \$42.11  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 675 Ponce De Leon Avenue, Northeast Suite 5000 Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Marketing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/06/2023	Payee name MailChimp	
Amount (\$) \$42.11  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 675 Ponce De Leon Avenue, Northeast Suite 5000 Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Marketing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/24 Rpt: 49/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 03/06/2023	<b>5</b> Payee name MailChimp	
<b>6</b> Amount (\$) \$42.11  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 675 Ponce De Leon Avenue, Northeast Suite 5000 Atlanta, GA 30308	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Marketing
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/06/2023	Payee name MailChimp	
Amount (\$) \$55.70  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 675 Ponce De Leon Avenue, Northeast Suite 5000 Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Marketing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/08/2023	Payee name MailChimp	
Amount (\$) \$55.70  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 675 Ponce De Leon Avenue, Northeast Suite 5000 Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Marketing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 16/24 Rpt: 50/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 06/06/2023	<b>5</b> Payee name MailChimp	
<b>6</b> Amount (\$) \$55.70  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 675 Ponce De Leon Avenue, Northeast Suite 5000 Atlanta, GA 30308	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email Marketing
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/09/2023	Payee name Pappadeux	
Amount (\$) \$4,758.25  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 18349 Dallas Parkway  Dallas, TX 75287	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Celebration Dinner 6.8.23
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/22/2023	Payee name Platinum Parking	
Amount (\$) \$43.30  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 500 E8th St  Austin, TX 78701	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking to Trip to Austin State Capital
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 17/24 Rpt: 51/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 04/14/2023	<b>5</b> Payee name Premiumbeat.com	
<b>6</b> Amount (\$) \$49.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4398, Boul. Saint-Laurent Suite 103 Montreal Quebec H2W1Z5 Canada	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Music for promo video for Day of Action & Prayer 4.25-2023 at the Austin State Capital
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/19/2023	Payee name Rumble	
Amount (\$) \$100.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 14318 Ben Brush  San Antonio, TX 78248	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Account Created for 4.25.23 Day of Action & Prayer at the Austin State Capital
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/13/2023	Payee name Rush Order Tees	
Amount (\$) \$2,323.08  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2727 Commerce Way  Philadelphia, PA 19154	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Promotional Items	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Promotional Items
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 18/24 Rpt: 52/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 02/14/2023	<b>5</b> Payee name Rush Order Tees	
<b>6</b> Amount (\$) \$450.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2727 Commerce Way  Philadelphia, PA 19154	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Promotional Items	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Promotional Items
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/27/2023	Payee name Signupgenius	
Amount (\$) \$11.99  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13777 Ballantyne Corporate Place, Suite 500C  Charlotte, NC 28277	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense RSVP's for Events
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/13/2023	Payee name Signupgenius	
Amount (\$) \$800.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13777 Ballantyne Corporate Place, Suite 500C  Charlotte, NC 28277	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Bus Trip Tickets Sold for bus trip to Austin State Capital
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 19/24 Rpt: 53/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
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<b>4</b> Date 02/27/2023	<b>5</b> Payee name Signupgenius
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<b>6</b> Amount (\$) \$11.99	<b>7</b> Payee address; City; State; Zip Code 13777 Ballantyne Corporate Place, Suite 500C  Charlotte, NC 28277
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense RSVPs for Meetings
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/27/2023	Payee name Signupgenius
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Amount (\$) \$11.99	Payee address; City; State; Zip Code 13777 Ballantyne Corporate Place, Suite 500C  Charlotte, NC 28277
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense RSVPs for Meetings
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/13/2023	Payee name Signupgenius
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Amount (\$) \$323.50	Payee address; City; State; Zip Code 13777 Ballantyne Corporate Place, Suite 500C  Charlotte, NC 28277
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Cancelled Bus Trip to Austin State Capital on 3.28.2023
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 20/24 Rpt: 54/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 04/27/2023	<b>5</b> Payee name Signupgenius	
<b>6</b> Amount (\$) \$11.99  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 13777 Ballantyne Corporate Place, Suite 500C  Charlotte, NC 28277	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense RSVPs for Meetings
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/26/2023	Payee name Signupgenius	
Amount (\$) \$3.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13777 Ballantyne Corporate Place, Suite 500C  Charlotte, NC 28277	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees for refund of bus trips on 3.13.23
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/30/2023	Payee name Signupgenius	
Amount (\$) \$11.99  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13777 Ballantyne Corporate Place, Suite 500C  Charlotte, NC 28277	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense RSVPs for Meetings
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 21/24 Rpt: 55/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 05/08/2023	<b>5</b> Payee name Signupgenius	
<b>6</b> Amount (\$) \$106.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 13777 Ballantyne Corporate Place, Suite 500C  Charlotte, NC 28277	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursements for cancelled bus trips in May
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/27/2023	Payee name Signupgenius	
Amount (\$) \$11.99  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13777 Ballantyne Corporate Place, Suite 500C  Charlotte, NC 28277	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense RSVPs for Meetings
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/26/2023	Payee name Square	
Amount (\$) \$23.35  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market Street Suite 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees charged for Jan
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 22/24 Rpt: 56/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 02/28/2023	<b>5</b> Payee name Square	
<b>6</b> Amount (\$) \$18.43  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1455 Market Street Suite 600 San Francisco, CA 94103	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees for Feb
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/31/2023	Payee name Square	
Amount (\$) \$80.77  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market Street Suite 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees for March
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/20/2023	Payee name Square	
Amount (\$) \$10.83  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market Street Suite 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Device to Process Credit Cards for Meetings and Events
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 23/24 Rpt: 57/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 04/30/2023	<b>5</b> Payee name Square	
<b>6</b> Amount (\$) \$59.88  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1455 Market Street Suite 600 San Francisco, CA 94103	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees for April
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/31/2023	Payee name Square	
Amount (\$) \$26.24  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market Street Suite 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees for May
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2023	Payee name Square	
Amount (\$) \$27.19  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market Street Suite 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees in June
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 24/24 Rpt: 58/58	<b>2</b> FILER NAME North Texas Conservative Coalition	<b>3</b> Filer ID (Ethics Commission Filers) 00084581
<b>4</b> Date 06/20/2023	<b>5</b> Payee name Weebly	
<b>6</b> Amount (\$) \$204.67  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 460 Bryant Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Website Hosting	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 1 year renewal for website hosting for online store.
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held