#### FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00087730 3 COMMITTEE NAME **OFFICE USE ONLY** Right2Farm Texas PAC Date Received **ELECTRONICALLY FILED** 07/16/2023 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1108 Lavaca, Suite 110-310 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78701 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. DeWayne NAME NICKNAME LAST **SUFFIX Burns** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1108 Lavaca STREET **ADDRESS** Suite 110-310 (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1108 Lavaca MAILING **ADDRESS** Suite 110-310 Austin, TX 78701 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (817) 648-4706 PHONE REPORT January 15 30th day before election Exceeded modified reporting limit **TYPE** Dissolution (Attach PAC-DR) 8th day before election X July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Year Month Day Year Month Day COVERED 05/25/2023 **THROUGH** 06/30/2023 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Other Primary Runoff 11/07/2023 χ General Special **GO TO PAGE 2**

### SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

### FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Con	nmission Filers)	
Right2Farm Texas PAC	:		00087730			
14 COMMITTEE PURPOSE		CANDIDATE / OFFICEHOLDER NAME				
(Attach lists on plain paper to complete this	Candidate					
report if necessary.)	Officeholder	OFFICE SOUGHT (candidate) / OFFICE HELI	O (officeholder)			
C CURRENT						
X SUPPORT (Candidate or Measure)		BALLOT IDENTIFICATION / #	ELECTI	ON DATE		
			Month	Day	Year	
(Candidate or Measure)	OPPOSE (Candidate or Measure) 11/07/2023					
ASSIST	X Measure	DESCRIPTION				
(Officeholder)		Constitutional Amendment for HJR 126				
15 CONTRIBUTION TOTALS		L TRIBUTIONS OF \$50 OR LESS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE LESS ITEMIZED	I PLEDGES,	\$	\$0.00	
	2. TOTAL POLITICAL C	ONTRIBUTIONS		1		
	(OTHER THAN PLEDGE	S, LOANS, OR GUARANTEES OF LOANS)		\$	\$107,670.89	
EXPENDITURE TOTALS					\$0.00	
	4. TOTAL POLITICAL E	XPENDITURES		\$	\$40.30	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CON REPORTING PERIOD	TRIBUTIONS MAINTAINED AS OF THE LAST	DAY OF THE	\$	\$106,959.70	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMO DAY OF THE REPORTIN	OUNT OF ALL OUTSTANDING LOANS AS OF T NG PERIOD	HE LAST	\$	\$0.00	
16 AFFIDAVIT		I swear, or affirm, under penalty of perj and correct and includes all information Title 15, Election Code.				
		Mr. DeWa	yne Burns			
AFFIX NOTARY	STAMP / SEAL ABOVE	Signature of Car	npaign Treasur	er	_	
Sworn to and subscribed	before me, by the said	, th	nis the		day	
of	, 20, to certify whic	h, witness my hand and seal of office.				
Signature of officer add	ministering oath Prin	ted name of officer administering oath	Title of office	er administe	ring oath	

### **SUBTOTALS - SPAC**

## FORM SPAC COVER SHEET PG 3

			3 of 7
17 COMMIT Right2F	TEE NAME arm Texas PAC	<b>18</b> Filer ID 00087730	(Ethics Commission Filers)
19 SCHEDU NAME C	SUBTOTAL AMOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,000.00	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. X	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	)R	\$ 100,000.00
5. X	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$ 670.89
6.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
7.	SCHEDULE E: LOANS		\$
8. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 40.30
9.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
10.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
11.	11. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
12.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	\$	
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	\$	
14.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/7	<b>\1</b> :	
2	FILER NAME Right2Farm Texas PAC				Filer ID (Ethics Commiss 00087730	ion Filers)
4	Date 06/30/2023  5 Full name of contributor out-of-state PAC (ID#:) Avant, Bob (Mr.)  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00	
8	Dringinal occu	Taylor, TX 76574  upation / Job title (See Instructions)	9 Employer (See Instructions	·, 		
Ů	Retired	pation 7 Job title (See Instructions)	Retired	·)		
	Date 06/06/2023	Full name of contributor out-of-state PAC (ID#:_ DeWayne Burns Campaign Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
		Cleburne, TX 76033				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/26/2023	Full name of contributor out-of-state PAC (ID#:_ Texas and Southwestern Cattle Raisers Associa Contributor address; City; State; Zip Code	ation State PAC		Amount of Contribution (\$)	\$5,000.00
		Fort Worth, TX 76185		_		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		

## MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

### SCHEDULE C1

	The Instruc	cti	on Guide explains how to complete this form.	1	Total pages Schedule C1: Sch: 1/1 Rpt: 5/7			
2	2 FILER NAME				Filer ID (Ethics Commission Filers)			
	Right2Farm Texas PAC				00087730			
4	Date	5	Corporation / Labor Organization name	7	7 Amount of contribution (\$)			
	06/30/2023		Texas Farm Bureau		\$100,000.00			
		6	Corporation / Labor Organization address; City; State; Zip Code					
			Waco, TX 76702					

# NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

#### SCHEDULE C2

⊢							
The Instruction Guide explains how to complete this form.				1 Total pages Schedule C2: Sch: 1/1 Rpt: 6/7			
2 FILER NAME				3 Filer ID (Ethics Commission Filers)			
		T BAO	l		ics Commission Filers)		
l	Right2Farm	Texas PAC	۱ ۱	00087730			
4	Date	5 Corporation / Labor Organization name	7	Amount of	8 In-kind contribution		
l	06/23/2023	Texas Farm Bureau		contribution(\$)	description		
l	00/23/2023			\$645.89	Solicitation Cards		
l		6 Corporation / Labor Organization address; City; State; Zip Code					
l							
l							
l		Waco, TX 76702		Check if travel outsi	ide of Texas. Complete Schedule T.		
H	<u> </u>		_				
l	Date	Corporation / Labor Organization name		Amount of contribution(\$)	In-kind contribution description		
l	06/29/2023	Texas Farm Bureau					
l		Corporation / Labor Organization address; City; State; Zip Code	1	\$25.00	Facebook Post		
l							
l							
l		Waco, TX 76702	Ιг		ide of Tours - Committee Coherdule T		
⊢		VV400, 17, 10102	<u> </u>	Check if travel outsi	ide of Texas. Complete Schedule T.		
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#### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

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

Advertising Expense

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Il Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Expense Printing Expense Salaries/Wages/Contract Labor	Travel in Distr Travel Out of			
Credit Card Payment  The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1: Sch: 1/1 Rpt: 7/7	l	E n Texas PAC		3 Filer ID 00087730	(Ethics Commission Filers)		
4 Date	5 Payee name			1			
06/30/2023	Anedot						
6 Amount (\$) \$40.30	7 Payee addre 1340 Poyd Ste. 1770	•	Zip Code				
	New Orlea	ns, LA 70112					
8 PURPOSE OF EXPENDITURE	OF Check if travel outside of Texas. Complete Schedule T.						
Complete ONLY if direct expenditure to benefit C/OI		ficeholder name C	Office sought	Office	held		