

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00016515	2 Total pages filed: 29
3 COMMITTEE NAME Texas Right To Life PAC		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/17/2023	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4500 Bissonnet St. Ste. 305 Bellaire, TX 77401		
	5 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI Ms. Rebecca NICKNAME LAST SUFFIX Parma		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4500 Bissonnet St., Suite 305 Bellaire, TX 77401		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4500 Bissonnet St., Suite 305 Bellaire, TX 77401		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 782-5433		
9 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		
10 PERIOD COVERED	Month Day Year Month Day Year 02/25/2023 THROUGH 06/30/2023		
11 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	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Texas Right To Life PAC	13 Filer ID (Ethics Commission Filers) 00016515
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Rep. Nate Schatzline State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,565.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,943.34
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 50,475.22
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 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. Rebecca Parma

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

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

Page 3 of 29

12 COMMITTEE NAME Texas Right To Life PAC		13 Filer ID (Ethics Commission Filers) 00016515
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Rep. Brian Harrison State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

SUBTOTALS - GPAC

17 COMMITTEE NAME Texas Right To Life PAC		18 Filer ID (Ethics Commission Filers) 00016515
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,565.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
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 checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 752.76
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 1,190.58
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/17 Rpt: 5/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 Date 03/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANIZ, PENNY	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77065		
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 04/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANIZ, PENNY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77065		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANIZ, PENNY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77065		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 06/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALANIZ, PENNY	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code HOUSTON, TX 77065		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, MARK AND TERRI	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code PLANO, TX 75023		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/17 Rpt: 6/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 Date 04/10/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, MARK AND TERRI <hr/> 6 Contributor address; City; State; Zip Code PLANO, TX 75023	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 05/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, MARK AND TERRI <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 06/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACK, MARK AND TERRI <hr/> Contributor address; City; State; Zip Code PLANO, TX 75023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUDREAU, NICOLE M. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) HINES		Employer (See Instructions) PROPERTY MANAGER
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUDREAU, NICOLE M. <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) HINES		Employer (See Instructions) PROPERTY MANAGER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/17 Rpt: 7/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 Date 05/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUDREAU, NICOLE M. 6 Contributor address; City; State; Zip Code HOUSTON, TX 77007	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) HINES		9 Employer (See Instructions) PROPERTY MANAGER
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOUDREAU, NICOLE M. Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) HINES		Employer (See Instructions) PROPERTY MANAGER
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUNO, NICHOLAS M. Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ASSOCIATE ATTORNEY		Employer (See Instructions) BECK REDDEN LLP
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUNO, NICHOLAS M. Contributor address; City; State; Zip Code HOUSTON, TX 77007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) ASSOCIATE ATTORNEY		Employer (See Instructions) BECK REDDEN LLP
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG, STEVEN Contributor address; City; State; Zip Code HOUSTON, TX 77072	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/17 Rpt: 8/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 Date 04/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG, STEVEN <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77072	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG, STEVEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77072	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRAIG, STEVEN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77072	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFFY, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFFY, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/17 Rpt: 9/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 Date 05/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFFY, PAUL <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78757	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUFFY, PAUL <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, ALAN B. <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79705	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, ALAN B. <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79705	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, ALAN B. <hr/> Contributor address; City; State; Zip Code MIDLAND, TX 79705	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/17 Rpt: 10/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 Date 06/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, ALAN B. 6 Contributor address; City; State; Zip Code MIDLAND, TX 79705	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, MELISSA Contributor address; City; State; Zip Code PLAINVIEW, TX 79073	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, MELISSA Contributor address; City; State; Zip Code PLAINVIEW, TX 79073	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, MELISSA Contributor address; City; State; Zip Code PLAINVIEW, TX 79073	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, MELISSA Contributor address; City; State; Zip Code PLAINVIEW, TX 79073	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/17 Rpt: 11/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 Date 03/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORMAN, JOHN & ANN MARIE	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code HOUSTON, TX 77070		
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 04/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORMAN, JOHN & ANN MARIE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77070		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORMAN, JOHN & ANN MARIE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77070		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 06/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GORMAN, JOHN & ANN MARIE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code HOUSTON, TX 77070		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, GERSON I.	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050		
Principal occupation / Job title (See Instructions) CANDIDATE		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/17 Rpt: 12/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 Date 04/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, GERSON I. 6 Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) CANDIDATE		9 Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, GERSON I. Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) CANDIDATE		Employer (See Instructions)
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HERNANDEZ, GERSON I. Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) CANDIDATE		Employer (See Instructions)
Date 03/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOPLIN, JOHN Contributor address; City; State; Zip Code FORT WORTH, TX 76131	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) MAINTENANCE TECHNICIAN - RETIRED		Employer (See Instructions) US POSTAL SERVICE
Date 04/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOPLIN, JOHN Contributor address; City; State; Zip Code FORT WORTH, TX 76131	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) MAINTENANCE TECHNICIAN - RETIRED		Employer (See Instructions) US POSTAL SERVICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/17 Rpt: 13/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 Date 05/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOPLIN, JOHN <hr/> 6 Contributor address; City; State; Zip Code FORT WORTH, TX 76131	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) MAINTENANCE TECHNICIAN - RETIRED		9 Employer (See Instructions) US POSTAL SERVICE
Date 06/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOPLIN, JOHN <hr/> Contributor address; City; State; Zip Code FORT WORTH, TX 76131	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) MAINTENANCE TECHNICIAN - RETIRED		Employer (See Instructions) US POSTAL SERVICE
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWSON, BETTY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWSON, BETTY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWSON, BETTY <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77008	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/17 Rpt: 14/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 Date 06/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWSON, BETTY <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 06/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, MANUEL <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77025	Amount of Contribution (\$) \$160.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) ROACH AND NEWTON LLP
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCAFFETY, BRUCE & SUZI <hr/> Contributor address; City; State; Zip Code SPRING, TX 77388	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) PASTOR		Employer (See Instructions) CANDLESTICK BAPTIST CHURCH
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCAFFETY, BRUCE & SUZI <hr/> Contributor address; City; State; Zip Code SPRING, TX 77388	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) PASTOR		Employer (See Instructions) CANDLESTICK BAPTIST CHURCH
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCAFFETY, BRUCE & SUZI <hr/> Contributor address; City; State; Zip Code SPRING, TX 77388	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) PASTOR		Employer (See Instructions) CANDLESTICK BAPTIST CHURCH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/17 Rpt: 15/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 Date 06/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCAFFETY, BRUCE & SUZI <hr/> 6 Contributor address; City; State; Zip Code SPRING, TX 77388	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) PASTOR		9 Employer (See Instructions) CANDLESTICK BAPTIST CHURCH
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURDOCH, KEVIN & LAURA <hr/> Contributor address; City; State; Zip Code LOS LUNAS, NM 87031	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EVANGELIST/CHURCH PLANTER		Employer (See Instructions) PSALM 19:7 MINISTRY
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURDOCH, KEVIN & LAURA <hr/> Contributor address; City; State; Zip Code LOS LUNAS, NM 87031	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EVANGELIST/CHURCH PLANTER		Employer (See Instructions) PSALM 19:7 MINISTRY
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURDOCH, KEVIN & LAURA <hr/> Contributor address; City; State; Zip Code LOS LUNAS, NM 87031	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EVANGELIST/CHURCH PLANTER		Employer (See Instructions) PSALM 19:7 MINISTRY
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MURDOCH, KEVIN & LAURA <hr/> Contributor address; City; State; Zip Code LOS LUNAS, NM 87031	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EVANGELIST/CHURCH PLANTER		Employer (See Instructions) PSALM 19:7 MINISTRY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/17 Rpt: 16/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 Date 04/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'CONNOR, IRENE H.	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) INTERNATIONAL PAPER COMPANY
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'CONNOR, IRENE H.	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) INTERNATIONAL PAPER COMPANY
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'CONNOR, IRENE H.	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) INTERNATIONAL PAPER COMPANY
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'CONNOR, IRENE H.	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) INTERNATIONAL PAPER COMPANY
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REECE, MATTHEW	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) LOCKHEED MARTIN

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/17 Rpt: 17/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 Date 04/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REECE, MATTHEW	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	
8 Principal occupation / Job title (See Instructions) PROGRAM MANAGER		9 Employer (See Instructions) LOCKHEED MARTIN
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REECE, MATTHEW	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) LOCKHEED MARTIN
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REECE, MATTHEW	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code GRAPEVINE, TX 76051	
Principal occupation / Job title (See Instructions) PROGRAM MANAGER		Employer (See Instructions) LOCKHEED MARTIN
Date 03/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEPULVEDA, CARLOS	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code DALLAS, TX 75225	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 04/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEPULVEDA, CARLOS	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code DALLAS, TX 75225	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/17 Rpt: 18/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 Date 05/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEPULVEDA, CARLOS	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code DALLAS, TX 75225		
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 06/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SEPULVEDA, CARLOS	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code DALLAS, TX 75225		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 03/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWIRSKY, ANDREW & NATALIE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code KINGWOOD, TX 77339		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 04/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWIRSKY, ANDREW & NATALIE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code KINGWOOD, TX 77339		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 05/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWIRSKY, ANDREW & NATALIE	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code KINGWOOD, TX 77339		
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/17 Rpt: 19/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 Date 06/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWIRSKY, ANDREW & NATALIE <hr/> 6 Contributor address; City; State; Zip Code KINGWOOD, TX 77339	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smither, DAVID & VERONICA <hr/> Contributor address; City; State; Zip Code Houston, TX 77071	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) Gemini
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smither, DAVID & VERONICA <hr/> Contributor address; City; State; Zip Code Houston, TX 77071	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) Gemini
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smither, DAVID & VERONICA <hr/> Contributor address; City; State; Zip Code Houston, TX 77071	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) Gemini
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smither, DAVID & VERONICA <hr/> Contributor address; City; State; Zip Code Houston, TX 77071	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) Gemini

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/17 Rpt: 20/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 Date 06/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TENNILLE, RICHARD N. <hr/> 6 Contributor address; City; State; Zip Code HOUSTON, TX 77024	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) CONOCO
Date 04/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TORVIK, STANFORD & GINGER <hr/> Contributor address; City; State; Zip Code ADKINS, TX 78101	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 05/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, AIMEE <hr/> Contributor address; City; State; Zip Code ABILENE, TX 79601	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) SELF
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOMACK, JOHN & JEANNETE <hr/> Contributor address; City; State; Zip Code PENITAS, TX 78576	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) BELL PROPERTIES
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOMACK, JOHN & JEANNETE <hr/> Contributor address; City; State; Zip Code PENITAS, TX 78576	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) BELL PROPERTIES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/17 Rpt: 21/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 Date 05/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOMACK, JOHN & JEANNETE <hr style="border-top: 1px dotted black;"/> 6 Contributor address; City; State; Zip Code PENITAS, TX 78576	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) OWNER		9 Employer (See Instructions) BELL PROPERTIES
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOMACK, JOHN & JEANNETE <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code PENITAS, TX 78576	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) BELL PROPERTIES

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: Sch: 1/1 Rpt: 22/29	
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515	
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0.00	
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	8 Amount of pledge (\$)	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code		
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 23/29
2 FILER NAME Texas Right To Life PAC		3 Filer ID (Ethics Commission Filers) 00016515
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 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.

1 Total pages Schedule F1: Sch: 1/2 Rpt: 24/29	2 FILER NAME Texas Right To Life PAC	3 Filer ID (Ethics Commission Filers) 00016515
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4 Date 05/12/2023	5 Payee name FIRST DATA MERCHANT SERVICES
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6 Amount (\$) \$506.48 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342
---	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CC FEES
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/16/2023	Payee name VISA
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Amount (\$) \$55.70 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 900 METRO CENTER BLVD FOSTER CITY, CA 94404
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment on a Credit Card
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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 04/14/2023	Payee name VISA
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Amount (\$) \$61.42 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 900 METRO CENTER BLVD FOSTER CITY, CA 94404
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment on a credit card
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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.

1 Total pages Schedule F1: Sch: 2/2 Rpt: 25/29	2 FILER NAME Texas Right To Life PAC	3 Filer ID (Ethics Commission Filers) 00016515
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4 Date 05/15/2023	5 Payee name VISA
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6 Amount (\$) \$73.46 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 900 METRO CENTER BLVD FOSTER CITY, CA 94404
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment on a credit card
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/16/2023	Payee name VISA
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Amount (\$) \$55.70 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 900 METRO CENTER BLVD FOSTER CITY, CA 94404
---	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment on a credit card
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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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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/4 Rpt: 26/29	2 FILER NAME Texas Right To Life PAC	3 Filer ID (Ethics Commission Filers) 00016515
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0.00
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5 Date 03/11/2023	6 Payee name MAILCHIMP
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7 Amount (\$) \$55.70 <input type="checkbox"/> Expenditure from corporate funds	8 Payee address; City; State; Zip Code 675 PONCE DE LEON AVE NE #5000 ATLANTA, GA 30308
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) EMAIL DELIVERY	(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 DELIVERY
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/11/2023	Payee name MAILCHIMP
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Amount (\$) \$55.70 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 675 PONCE DE LEON AVE NE #5000 ATLANTA, GA 30308
---	--

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Email Delivery	(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 Delivery
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 2/4 Rpt: 27/29	2 FILER NAME Texas Right To Life PAC	3 Filer ID (Ethics Commission Filers) 00016515
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0.00
--	---------

5 Date 06/11/2023	6 Payee name MAILCHIMP
-----------------------------	----------------------------------

7 Amount (\$) \$55.70 <input type="checkbox"/> Expenditure from corporate funds	8 Payee address; City; State; Zip Code 675 PONCE DE LEON AVE NE #5000 ATLANTA, GA 30308
---	---

9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Email delivery	(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 delivery
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/26/2023	Payee name NATE FOR TEXAS
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13037 MONTE ALTO ST. FORT WORTH, TX 76244
---	--

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution to Nate Schatzline for House District 93
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 3/4 Rpt: 28/29	2 FILER NAME Texas Right To Life PAC	3 Filer ID (Ethics Commission Filers) 00016515
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0.00
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5 Date 06/29/2023	6 Payee name TEXANS FOR BRIAN HARRISON
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7 Amount (\$) \$500.00	8 Payee address; City; State; Zip Code 6061 HAYES ROAD MIDLOTHIAN, TX 76065
----------------------------------	--

Expenditure from corporate funds

9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contribution to Texans for Brian Harrison
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/10/2023	Payee name USPS
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Amount (\$) \$5.72	Payee address; City; State; Zip Code 5350 Bellaire Blvd Bellaire, TX 77401
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Expenditure from corporate funds

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Postage	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage
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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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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 4/4 Rpt: 29/29	2 FILER NAME Texas Right To Life PAC	3 Filer ID (Ethics Commission Filers) 00016515
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0.00
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5 Date 04/12/2023	6 Payee name USPS
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7 Amount (\$) \$8.76 <input type="checkbox"/> Expenditure from corporate funds	8 Payee address; City; State; Zip Code 5350 Bellaire Blvd Bellaire, TX 77401
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Postage	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage for tax return
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/25/2023	Payee name USPS
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Amount (\$) \$9.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5350 Bellaire Blvd Bellaire, TX 77401
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Postage	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage for tax return
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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