

# 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) 00058340	<b>2</b> Total pages filed: 20
<b>3</b> COMMITTEE NAME Texans for Toll-free Highways		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 01/15/2024	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
<b>4</b> COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 317 Sidney Baker S, Suite 400-308  Kerrville, TX 78028		
	<b>5</b> CAMPAIGN TREASURER NAME  MS / MRS / MR FIRST MI Sudie  NICKNAME LAST SUFFIX Sartor		
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3530 Eva Jane  San Antonio, TX 78261		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 488-5412		
<b>9</b> REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input 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      Month Day Year 07/01/2023      THROUGH      12/31/2023		
<b>11</b> ELECTION	ELECTION DATE Month Day Year 03/05/2024	ELECTION TYPE <input checked="" 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> Texans for Toll-free Highways	<b>13 Filer ID</b> (Ethics Commission Filers) 00058340
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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 Ms. GINA PARKER Court Of Appeals, Justice
		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 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>	\$ 2,220.00
<b>EXPENDITURE TOTALS</b>	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 19.10
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 2,376.67
<b>CONTRIBUTION BALANCE</b>	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 4,023.67
<b>OUTSTANDING LOAN TOTALS</b>	<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.

Sudie Sartor  
\_\_\_\_\_  
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

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<b>12 COMMITTEE NAME</b> Texans for Toll-free Highways		<b>13 Filer ID</b> (Ethics Commission Filers) 00058340
<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 Mr. ANDY HOPPER State Representative  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>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Mr. TOM GLASS State Representative  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>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 Mr. DALE HULS State Representative  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.)		

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**  
ADDENDUM

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<b>12 COMMITTEE NAME</b> Texans for Toll-free Highways	<b>13 Filer ID</b> (Ethics Commission Filers) 00058340
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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 Ms. JAMIE HAYNES State Representative
		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>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 Mr. MIKE OLCOTT State Representative
		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.)	

# SUBTOTALS - GPAC

<b>17 COMMITTEE NAME</b> Texans for Toll-free Highways		<b>18 Filer ID</b> (Ethics Commission Filers) 00058340
<b>19 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,220.00
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	\$ 2,376.67
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>		<b>1</b> Total pages Schedule A1: Sch: 1/9 Rpt: 6/20
<b>2</b> FILER NAME Texans for Toll-free Highways		<b>3</b> Filer ID (Ethics Commission Filers) 00058340
<b>4</b> Date 10/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) BYAS, FORREST <hr/> <b>6</b> Contributor address; City; State; Zip Code  SAN ANTONIO, TX 78232	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) MANAGER		<b>9</b> Employer (See Instructions) ZEIT ENERGY
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bulger, Linda <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78258	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bulger, Linda <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78258	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bulger, Linda <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78258	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bulger, Linda <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78258	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/9 Rpt: 7/20
<b>2</b> FILER NAME Texans for Toll-free Highways		<b>3</b> Filer ID (Ethics Commission Filers) 00058340
<b>4</b> Date 08/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bulger, Linda <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78258	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bulger, Linda <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78258	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bulger, Linda <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78258	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chambers, Chris <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78261	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chambers, Chris <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78261	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/9 Rpt: 8/20
<b>2</b> FILER NAME Texans for Toll-free Highways		<b>3</b> Filer ID (Ethics Commission Filers) 00058340
<b>4</b> Date 10/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chambers, Chris <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78261	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chambers, Chris <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78261	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chambers, Chris <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78261	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chambers, Chris <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78261	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ESTOK, JOHN PATRICK <hr/> Contributor address; City; State; Zip Code  PORT CHARLOTTE, FL 33952	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) JANITOR		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: 4/9 Rpt: 9/20
<b>2</b> FILER NAME Texans for Toll-free Highways		<b>3</b> Filer ID (Ethics Commission Filers) 00058340
<b>4</b> Date 11/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ESTOK, JOHN PATRICK <hr/> <b>6</b> Contributor address; City; State; Zip Code  PORT CHARLOTTE, FL 33952	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) JANITOR		<b>9</b> Employer (See Instructions)
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ESTOK, JOHN PATRICK <hr/> Contributor address; City; State; Zip Code  PORT CHARLOTTE, FL 33952	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) JANITOR		Employer (See Instructions)
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ESTOK, JOHN PATRICK <hr/> Contributor address; City; State; Zip Code  PORT CHARLOTTE, FL 33952	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) JANITOR		Employer (See Instructions)
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ESTOK, JOHN PATRICK <hr/> Contributor address; City; State; Zip Code  PORT CHARLOTTE, FL 33952	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) JANITOR		Employer (See Instructions)
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) ESTOK, JOHN PATRICK <hr/> Contributor address; City; State; Zip Code  PORT CHARLOTTE, FL 33952	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) JANITOR		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: 5/9 Rpt: 10/20
<b>2</b> FILER NAME Texans for Toll-free Highways		<b>3</b> Filer ID (Ethics Commission Filers) 00058340
<b>4</b> Date 12/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Falcon Borel , Linda <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78260	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) retired
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Falcon Borel , Linda <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78260	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Falcon Borel , Linda <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78260	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Falcon Borel , Linda <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78260	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Falcon Borel , Linda <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78260	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/9 Rpt: 11/20
<b>2</b> FILER NAME Texans for Toll-free Highways		<b>3</b> Filer ID (Ethics Commission Filers) 00058340
<b>4</b> Date 10/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LEMES, RALPH <hr/> <b>6</b> Contributor address; City; State; Zip Code  BULVERDE, TX 78163	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) RETIRED		<b>9</b> Employer (See Instructions)
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marburger , Thomas <hr/> Contributor address; City; State; Zip Code  BRENHAN, TX 77833	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marburger , Thomas <hr/> Contributor address; City; State; Zip Code  BRENHAM, TX 77833	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marburger , Thomas <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 77833	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self
Date 09/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marburger , Thomas <hr/> Contributor address; City; State; Zip Code  BRENHAM, TX 77833	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/9 Rpt: 12/20
<b>2</b> FILER NAME Texans for Toll-free Highways		<b>3</b> Filer ID (Ethics Commission Filers) 00058340
<b>4</b> Date 12/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phelps, Kenneth <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78259	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) retired
Date 11/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phelps, Kenneth <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78259	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phelps, Kenneth <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78259	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phelps, Kenneth <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78259	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phelps, Kenneth <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78259	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/9 Rpt: 13/20
<b>2</b> FILER NAME Texans for Toll-free Highways		<b>3</b> Filer ID (Ethics Commission Filers) 00058340
<b>4</b> Date 07/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phelps, Kenneth <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78259	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) retired
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) SIMS, DAVID <hr/> Contributor address; City; State; Zip Code  HUNTSVILLE, TX 77320	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) SIMS, DAVID <hr/> Contributor address; City; State; Zip Code  HUNTSVILLE, TX 77320	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) SIMS, DAVID <hr/> Contributor address; City; State; Zip Code  HUNTSVILLE, TX 77320	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) SIMS, DAVID <hr/> Contributor address; City; State; Zip Code  HUNTSVILLE, TX 77320	Amount of Contribution (\$)  \$5.00
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: 9/9 Rpt: 14/20
<b>2</b> FILER NAME Texans for Toll-free Highways		<b>3</b> Filer ID (Ethics Commission Filers) 00058340
<b>4</b> Date 08/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) SIMS, DAVID <hr/> <b>6</b> Contributor address; City; State; Zip Code  HUNTSVILLE, TX 77320	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) RETIRED		<b>9</b> Employer (See Instructions)
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) SIMS, DAVID <hr/> Contributor address; City; State; Zip Code  HUNTSVILLE, TX 77320	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) RETIRED		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: 1/6 Rpt: 15/20	<b>2</b> FILER NAME Texans for Toll-free Highways	<b>3</b> Filer ID (Ethics Commission Filers) 00058340
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<b>4</b> Date 09/15/2023	<b>5</b> Payee name 7 ELEVEN
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<b>6</b> Amount (\$) \$33.19	<b>7</b> Payee address; City; State; Zip Code 10361 S PADRE ISLAND DRIVE  CORPUS CHRISTI, TX 78418
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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) Food/Beverage 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 SNACKS
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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 12/29/2023	Payee name CONSTANT CONTAC
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Amount (\$) \$154.57	Payee address; City; State; Zip Code 1601 TRAPELO RD  WALTHAM, MA 02451
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Expenditure from corporate funds

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 WEBSITE AND EMAIL
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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 12/29/2023	Payee name CONSTANT CONTAC
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Amount (\$) \$154.57	Payee address; City; State; Zip Code 1601 TRAPELO RD  WALTHAM, MA 02451
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Expenditure from corporate funds

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 WEBSITE/EMAIL
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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: 2/6 Rpt: 16/20	<b>2</b> FILER NAME Texans for Toll-free Highways	<b>3</b> Filer ID (Ethics Commission Filers) 00058340
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<b>4</b> Date 10/24/2023	<b>5</b> Payee name CONSTANT CONTAC
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<b>6</b> Amount (\$) \$5.33  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1601 TRAPELO RD  WALTHAM, MA 02451
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<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
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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 10/10/2023	Payee name CONSTANT CONTAC
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Amount (\$) \$10.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 TRAPELO RD  WALTHAM, MA 02451
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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
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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 10/30/2023	Payee name CONSTANT CONTAC
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Amount (\$) \$154.57  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 TRAPELO RD  WALTHAM, MA 02451
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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
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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: 3/6 Rpt: 17/20	<b>2</b> FILER NAME Texans for Toll-free Highways	<b>3</b> Filer ID (Ethics Commission Filers) 00058340
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<b>4</b> Date 09/29/2023	<b>5</b> Payee name CONSTANT CONTAC
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<b>6</b> Amount (\$) \$154.57  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1601 TRAPELO RD  WALTHAM, MA 02451
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<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
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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 09/21/2023	Payee name CONSTANT CONTAC
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Amount (\$) \$10.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 TRAPELO RD  WALTHAM, MA 02451
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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
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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 08/29/2023	Payee name CONSTANT CONTAC
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Amount (\$) \$154.57  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 TRAPELO RD  WALTHAM, MA 02451
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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
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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: 4/6 Rpt: 18/20	<b>2</b> FILER NAME Texans for Toll-free Highways	<b>3</b> Filer ID (Ethics Commission Filers) 00058340
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<b>4</b> Date 08/25/2023	<b>5</b> Payee name CONSTANT CONTAC
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<b>6</b> Amount (\$) \$5.33  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1601 TRAPELO RD  WALTHAM, MA 02451
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<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
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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 07/31/2023	Payee name CONSTANT CONTAC
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Amount (\$) \$154.57  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1601 TRAPELO RD  WALTHAM, MA 02451
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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
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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 11/24/2023	Payee name DailyRazor.com
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Amount (\$) \$83.40  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4500 Forbes Blvd, Ste 200  Lanham, TX 20706
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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 WEBSITE/EMAIL
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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: 5/6 Rpt: 19/20	<b>2</b> FILER NAME Texans for Toll-free Highways	<b>3</b> Filer ID (Ethics Commission Filers) 00058340
<b>4</b> Date 12/20/2023	<b>5</b> Payee name FULL FUSION LLC	
<b>6</b> Amount (\$) \$387.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 317 SIDNEY BAKER S, STE 400-308  KERRVILLE, TX 78028	
<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 WEBSITE
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/25/2023	Candidate/Officeholder name OFFICE MAX	
Amount (\$) \$200.25  <input type="checkbox"/> Expenditure from corporate funds	Office sought 307 SIDNEY BAKER S  KERRVILLE, TX 78028	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing 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 LITERATURE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/29/2023	Candidate/Officeholder name TEXANS UNITING FOR REFORM AND FREEDOM	
Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	Office sought 317 SIDNEY BAKER S, STE 400-308  KERRVILLE, TX 78028	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) DONATION	<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 NON-PROFIT
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: 6/6 Rpt: 20/20	<b>2</b> FILER NAME Texans for Toll-free Highways	<b>3</b> Filer ID (Ethics Commission Filers) 00058340
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<b>4</b> Date 09/25/2023	<b>5</b> Payee name UPS Store #3736
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<b>6</b> Amount (\$) \$156.43  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 317 S Sidney Baker St #400  Kerrville, TX 78028
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<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 PO BOX RENTAL
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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 09/15/2023	Payee name UPS Store #3736
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Amount (\$) \$37.90  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 317 S Sidney Baker St #400  Kerrville, TX 78028
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing 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 LITERATURE
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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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