#### 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 C 00051	Commission Filers)		<ul><li>2 Total pages filed:</li><li>44</li></ul>
3 COMMITTEE NAME						OFFICE USE ONLY
Texas Alliance for	Life					Date Received
						ELECTRONICALLY FILED
						02/02/2024
4 COMMITTEE	ADDRESS / PO BOX; APT / SUITE	#; Cl	TY; S	STATE; ZIP	CODE	
ADDRESS	8000 Centre Park Dr., Ste. 380					Date Hand-delivered or Date Postmarked
Change of Address						
	Austin, TX 78754-5136					Receipt # Amount
						Date Processed
						Date Imaged
5 CAMPAIGN	MS / MRS / MR FIRST					MI
TREASURER NAME	Mr. James	C.				
	NICKNAME LAST					SUFFIX
	Shaw					
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PL	EASE);		APT / SUITE #;	CITY;	STATE; ZIP CODE
TREASURER STREET	4505 Corazon Cv.					
ADDRESS						
(Residence or Business)	Round Rock, TX 78681					
7 CAMPAIGN	STREET OR PO BOX;			APT / SUITE #;	CITY;	STATE; ZIP CODE
TREASURER MAILING	8000 Centre Park Dr., Ste. 380					
ADDRESS						
Change of Address	Austin, TX 78754					
8 CAMPAIGN	AREA CODE PHONE NUMB	ER	EXTENSIO	N		
TREASURER PHONE	(512) 789-0111					
9 REPORT TYPE	January 15	X 3	Oth day before	e election		Dissolution (Attach PAC-DR)
		— П 8	th day before	election		10th day after campaign treasurer
	July 15		-		L	termination
			unoff			
10 PERIOD	Month Day Year			Month	Day	Year
COVERED	01/21/2024	Т	HROUGH	0.	1/25/2024	1
					T)/DC	
11 ELECTION	ELECTION DATE Month Day Year	X	Primary	ELECTION	ITPE	Other
	03/05/2024					
			General	Special		
		GO	TO PAGE	2		
Forms provided by Te	xas Ethics Commission	www.e	thics.state.	.tx.us		Version V3.5.1.9000c471
Forms provided by Te	xas Ethics Commission					Version V3.5.1.9000c471

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

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)				
Texas Alliance for Life			00051076					
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Christi Craddick Railroad Com	missioner					
(Attach lists on plain paper to complete this report if necessary.)		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	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00				
		2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)						
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	\$	0.00					
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	6,329.04				
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00				
16 AFFIDAVIT			•					
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.						
			es C. Shaw					
		Signature of Ca	mpaign Treasur	ei				
AFFIX NOTARY	STAMP / SEAL ABOVE							
		, ti	his the	day				
of	, 20, to certify v	which, witness my hand and seal of office.						
Signature of officer adr	ninistering oath	Printed name of officer administering oath	Title of offic	er administering oath				
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V3.5.1.9000c47f				

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jimmy Blackl	ock Supreme Cour	t Justice	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		John Devine	Supreme Court Jus	stice	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Jane Bland S	Supreme Court Just	ice	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life				00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Sharon Keller Court of Criminal	Appeals, Presi	ding Judge
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Barbara Hervey Court Of Crimin	al Appeals, Ju	dge
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Michelle Slaughter Court Of Crir	ninal Appeals,	Judge
(Attach lists on plain paper to complete this report if necessary.)		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.)				
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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life				00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Tom Maynard State Board Of	Education	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Patricia Hardy State Board Of	Education	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Pam Little State Board Of Edu	ucation	
(Attach lists on plain paper to complete this report if necessary.)		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				
Eorms provided by Texas I	applicable, classify by party.)		ethics state ty us		Version V/3 5 1 9000c/7

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life				00051076	
14 COMMITTEE	1. Candidates	A. Supported	Aaron Kinsey State Board Of Ec	ducation	
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Paul Bettencourt State Senator		
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE	1. Candidates	A. Supported	Angela Paxton State Senator		
ACTIVITY	(Identify by name or, if applicable, classify by party.)		5		
(Attach lists on plain paper to complete this report if necessary.)		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.)				

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12 COMMITTEE NAME						13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life						00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Supported	Phil King State	e Senator		
(Attach lists on plain paper to complete this report if necessary.)		В. (	Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. 3	Supported				
		В. (	Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. 3	Supported	Tan Parker St	ate Senator		
(Attach lists on plain paper to complete this report if necessary.)		В. (	Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. \$	Supported				
		В. (	Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Supported	Joan Huffman	State Senator		
(Attach lists on plain paper to complete this report if necessary.)		В. (	Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. 3	Supported				
		В. (	Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	)					
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12 COMMITTEE NAME			<b>13</b> Filer ID (Ethics Commission Filers)
Texas Alliance for Life			00051076
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Adam Hinojosa State Ser	ator
(Attach lists on plain paper to complete this report if necessary.)		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.)		
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Donna Campbell State Se	enator
(Attach lists on plain paper to complete this report if necessary.)		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.)		
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Brent Hagenbuch State S	enator
(Attach lists on plain paper to complete this report if necessary.)		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.)		
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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life				00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Gary VanDeaver State Repre	sentative	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE	1. Candidates	A. Supported	Jill Dutton State Representativ	/e	
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE	1. Candidates	A. Supported	Cecil Bell Jr. State Represent	ative	
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		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.)				
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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Keith Bell	State Representative	<u>,</u>	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	1			
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Cole Hefr	ner State Representat	ive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	I			
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		I Jay Dean	State Representative	2	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	l			
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Support	ed	Cody Harris State Representativ	'e	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	d			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Support	ed			
		B. Oppose	d			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE	I	A Support	od	Trent Ashby Ctate Depresentation		
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		eu	Trent Ashby State Representativ	/e	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	d			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Support	ed			
		B. Oppose	d			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		ed	Travis Clardy State Representat	ive	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	d			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Support	ed			
		B. Oppose	d			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
		1				

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12 COMMITTEE NAME							13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life							00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Support	ted	Angelia Orr S	State Re	presentative	5	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	ed					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Support	ted					
		B. Oppose	ed					
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		ted	Will Metcalf	State Re	presentative	9	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	ed					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Support	ted					
		B. Oppose	ed					
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		ted	Stan Gerdes	State R	epresentativ	ve	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	ed					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Support	ted					
		B. Oppose	ed					
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							

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12 COMMITTEE NAME							13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life							00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		ted	Ernest Bailes	State Re	epresentat	ive	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	ed					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Suppor	ted					
		B. Oppose	ed					
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Suppor	ted	Ellen Troxclair	State R	epresenta?	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	ed					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Suppor	ted					
		B. Oppose	ed					
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Suppor	ted	Terry Wilson S	itate Re	presentati	ve	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	ed					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Suppor	ted					
		B. Oppose	ed					
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Dade Phela	n State Representa	ative	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Greg Bonne	n State Represent	ative	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Cody Vasut	State Representat	tive	
(Attach lists on plain paper to complete this report if necessary.)		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.)					

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life				00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jacey Jetton State Representati	ve	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Gary Gates State Representativ	e	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Ryan Guillen State Representati	ve	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
		1			

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Todd Hunter	State Representat	ive	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Justin Hollan	d State Representa	ative	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Janie Lopez	State Representati	ve	
(Attach lists on plain paper to complete this report if necessary.)		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.)					

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	John (Doc) Ro	bert Guerra State	e Representativ	3
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	J.M. Lozano S	tate Representati	ve	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	John Kuempel	State Represent	ative	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Caroline Harr	is Davila State Rep	oresentative	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Hatch Smith	State Representativ	ve	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Brad Buckley	State Representat	tive	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
		1				

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Hugh Shine St	ate Representativ	/e	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Pat Curry State	e Representative		
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Richard Hayes	State Represent	ative	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
	•					

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12 COMMITTEE NAME							13	Filer ID	(Ethics Commission Filers)
Texas Alliance for Life								00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supp	orted	DeWayne Burn	s Sta	te Repre	esentat	ive	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppo	sed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supp	orted						
		В. Оррс	sed						
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)								
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supp	orted	Shelby Slawso	n Stat	e Repres	esentati	ve	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppo	sed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supp	orted						
		В. Орро	sed						
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)								
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		orted	Glenn Rogers	State	Represe	entative	•	
(Attach lists on plain paper to complete this report if necessary.)		В. Орро	sed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supp	orted						
		В. Оррс	sed						
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)								

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Frederick Fraz	ier State Represe	entative	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Reggie Smith	State Representa	tive	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ben Bumgarne	er State Represer	ntative	
(Attach lists on plain paper to complete this report if necessary.)		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.)					

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12 COMMITTEE NAME							1	3 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life								00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Suppor	rted	Lynn Stucky S	State R	epresen	ntative		
(Attach lists on plain paper to complete this report if necessary.)		B. Oppos	ed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Suppo	rted						
		B. Oppos	ed						
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)								
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Suppor	rted	Kronda Thime	sch S	ate Repi	resen	tative	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppos	ed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Suppo	rted						
		B. Oppos	ed						
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)								
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Suppor	rted	Matt Shaheen	State	Represe	entativ	/e	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppos	ed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Suppor	rted						
		B. Oppos	ed						
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)								

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jeff Leach St	ate Representative		
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	David Spiller	State Representati	ve	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		James Frank	State Representati	ive	
(Attach lists on plain paper to complete this report if necessary.)		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.)					

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supporte	d Stan Lambe	rt State Representa	tive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supporte	d			
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supporte	d Drew Darby	State Representativ	/e	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supporte	d			
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		d Carrie Isaac	State Representativ	ve	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supporte	d			
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					

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12 COMMITTEE NAME						13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life						00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supporte	ed	Robert Garza State Repres	sentat	ive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	d				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supporte	ed				
		B. Opposed	d				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supporte	ed	Brooks Landgraf State Rep	oreser	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	d				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supporte	ed				
		B. Opposed	d				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		ed	Tom Craddick State Repres	sentat	tive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	d				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supporte	ed				
		B. Opposed	d				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
	1						

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life				00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Dustin Burrows State Represen	itative	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Carl Tepper State Representati	ve	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Stan Kitzman State Representa	tive	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
		1			

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		pported	John Smithee State Representa	tive	
(Attach lists on plain paper to complete this report if necessary.)		В. Ор	posed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Su	pported			
		B. Op	posed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Su	pported	Ken King State Representative		
(Attach lists on plain paper to complete this report if necessary.)		В. Ор	posed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Su	pported			
		В. Ор	posed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		pported	Candy Noble State Representat	ive	
(Attach lists on plain paper to complete this report if necessary.)		В. Ор	posed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Su	pported			
		В. Ор	posed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE	1. Candidates	A. Supported	Stephanie Kli	ck State Represen	tative	
ACTIVITY	(Identify by name or, if applicable, classify by party.)					
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Nate Schatzli	ne State Represen	ntative	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE	1. Candidates		David Cook	State Representativ	/e	
ACTIVITY	(Identify by name or, if applicable, classify by party.)				-	
(Attach lists on plain paper to complete this report if necessary.)		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.)					

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Giovanni Capr	iglione State Rep	presentative	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Charlie Geren	State Represent	ative	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Jared Patterso	n State Represe	ntative	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
		1				

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12 COMMITTEE NAME						13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life						00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Suppo	rted	Dabney Basse	Court Of App	peals, Justice	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppos	ed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Suppo	rted				
		B. Oppos	ed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Suppo	rted	Jaime Tijerina	Court of Appe	als,Chief Justice	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppos	ed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Suppo	rted				
		B. Oppos	ed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		rted	Jenny Cron Co	ourt Of Appeals	s, Justice	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppos	ed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Suppo					
		B. Oppos	ed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		ported	Ysmael Fonseca Court Of Appea	als, Justice	
(Attach lists on plain paper to complete this report if necessary.)		В. Орр	osed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Sup	-			
		В. Орр	osed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	I					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Sup	ported	Jon West Court Of Appeals, Jus	tice	
(Attach lists on plain paper to complete this report if necessary.)		В. Орр	osed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Sup	ported			
r		В. Орр	osed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE	1. Candidates	A. Sup	norted	Morgan Meyer State Representa	ativo	
ACTIVITY	(Identify by name or, if applicable, classify by party.)	Λ. Ουρ	porteu	Morgan Meyer State Representa	alive	
(Attach lists on plain paper to complete this report if necessary.)		В. Орр	osed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Sup	ported			
		В. Орр	osed			
	3. Officeholders Assisted (Identify by name or, if					
	applicable, classify by party.)					

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life				00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Angie Chen Button State Repre	esentative	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	John Lujan State Representativ	re	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Steve Allison State Representa	tive	
(Attach lists on plain paper to complete this report if necessary.)		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.)				

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mark Dorazio	State Representa	tive	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Sam Harless	State Representat	ive	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Charles Cunr	iingham State Rep	presentative	
(Attach lists on plain paper to complete this report if necessary.)		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.)					

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jason Herring	g District Attorney	(Multi-county)	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Grant Moody	Bexar County Co	mmissioner Pre	cinct 3
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Cam McCall	Collin County Tax	Assessor-Colle	ctor
(Attach lists on plain paper to complete this report if necessary.)		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.)					

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life				00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Lorne Liechty Rockwall County	Commissioner,	Precinct 3
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Sean Whittmore Criminal Distric	ct Attorney	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Briscoe Cain State Representat	ive	
(Attach lists on plain paper to complete this report if necessary.)		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.)				

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Dennis Paul Si	ate Representativ	/e	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Tom Oliverson	State Representa	ative	
(Attach lists on plain paper to complete this report if necessary.)		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.)					
COMMITTEE	1. Candidates		Mike Schofield	State Representa	ativo	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		WIKE SCHOILEIG	State Representa	alive	
(Attach lists on plain paper to complete this report if necessary.)		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.)	<u> </u>				

#### FORM GPAC

ADDENDUM

Page 37 of 44

12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Alliance for Life					00051076	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supp	oorted	Mano DeAyala State Represent	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opp	osed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supp	oorted			
		B. Opp	osed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supp	oorted	Lacey Hull State Representative	)	
(Attach lists on plain paper to complete this report if necessary.)		В. Орр	osed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supp	oorted			
		В. Орр	osed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		oorted	Valoree Swanson State Represe	entative	
(Attach lists on plain paper to complete this report if necessary.)		В. Орр	osed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supp	oorted			
		B. Opp	osed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
		-				

SUBTOTALS - GPAC	C	FORM GPAC OVER SHEET PG 3 38 of 44
17 COMMITTEE NAME Texas Alliance for Life	18 Filer ID 00051076	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	1	SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 850.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO	DR	\$
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR	\$
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	2	\$
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9. SCHEDULE E: LOANS		\$
10. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/6 Rpt: 39/44 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Texas Alliance for Life 00051076 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 01/23/2024 Atkins, Mary \$10.00 6 Contributor address; City; State; Zip Code Cedar Park, TX 78613 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/23/2024 \$50.00 Berger, Becky Contributor address; City; State; Zip Code Schulenberg, TX 78956 Principal occupation / Job title (See Instructions) Employer (See Instructions) Geologist Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 01/23/2024 Fitzgerald, Aine \$10.00 Contributor address; City; State; Zip Code Waco, TX 76710 Principal occupation / Job title (See Instructions) Employer (See Instructions) Tutor/Self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/23/2024 \$10.00 Floyd, Kathleen Contributor address; City; State; Zip Code Dripping Springs, TX 78620 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Registered Nurse** Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 01/23/2024 \$50.00 Givens, Edward Contributor address; City; State; Zip Code Austin, TX 78717 Principal occupation / Job title (See Instructions) Employer (See Instructions) Analyst

#### SCHEDULE A1

	The Instru	ction Guide explains how to complete	e this fo	orm.	1	Total pages Schedule A1: Sch: 2/6 Rpt: 40/44	
2	FILER NAME				3	Filer ID (Ethics Commission	i Filers)
	Texas Allian	ce for Life				00051076	
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:_	)	7	Amount of Contribution (\$)	
	01/23/2024	HENDERSON, TERRY					\$10.00
		6 Contributor address; City; State; Zip Code					
		LOCKHART, TX 78644					
8		pation / Job title (See Instructions)		9 Employer (See Instructions	)		
	retired						
	Date	Full name of contributor out-of-state PA	AC (ID#:	)		Amount of Contribution (\$)	
	01/23/2024	Hashman, Lisa & Tom					\$50.00
		Contributor address; City; State; Zip Code					
		Driftwood, TX 78619					
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	Pediatrician/	Retired					
	Date	Full name of contributor out-of-state PA	PAC (ID#:	)		Amount of Contribution (\$)	_
	01/23/2024	Haynes, Brent					\$25.00
		Contributor address; City; State; Zip Code					
		Houston TV 77009					
	Drizoinal agou	Houston, TX 77008		Employer (Cap Instructions	<u> </u>		
		pation / Job title (See Instructions) alveston County District Attorney		Employer (See Instructions	)		
	-						
	Date	Full name of contributor out-of-state PA	'AC (ID#:	)		Amount of Contribution (\$)	÷40.00
	01/23/2024	Huebner, Katherine					\$10.00
		Contributor address; City; State; Zip Code					
		Richardson, TX 75081					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Semi-Retired				)		
╞						t f Contribution (ft)	
	Date	Full name of contributor out-of-state PA	'AC (ID#:	)		Amount of Contribution (\$)	¢25.00
	01/23/2024	Joiner, Diane & Steve					\$25.00
		Contributor address; City; State; Zip Code					
		Lakeway, TX 78738					
$\vdash$	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>ן</u>		
	Association I				)		
4							

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	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 41/44	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Texas Allian	ce for Life			00051076	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	01/23/2024	Kruczek, Loraine	/			\$10.00
	01,10, 11	6 Contributor address; City; State; Zip Code		•		<b>+-</b>
		Contributor address, City, State, Zip Code				
		Austin, TX 78737				
8	Principal occu	I Ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Retired					
	Date	Full name of contributor Out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	01/23/2024	Manning, Lillian	/		,	\$10.00
	01,20,2	Contributor address: City: State: Zip Code		$\mathbf{I}$		<b>*-·</b> ···
		Continuation address, City, State, Zip Code				
		San Marcos, TX 78666				
-	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Religious Sis		F 7 X	,		
-	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u> )	Γ	Amount of Contribution (\$)	
	01/23/2024	Maxey, Sherri and Erik	/		Allount of Contribution (*)	\$10.00
	01,20,202.			$\mathbf{I}$		Ψ±0.00
		Continuation address, City, State, Zip Code				
		Jarrell, TX 76537				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Office Manag	ger				
╞	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	01/23/2024	Moreland, Ronda & KC			· · ·	\$50.00
		Contributor address; City; State; Zip Code		$\mathbf{I}$		
		Dallas, TX 75218				
┢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Radio Produ	icer				
F	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	01/23/2024	Pojman, Beatriz & Joe				\$100.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78728				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive Di	rector	Texas Alliance for Life			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 4/6 Rpt: 42/44
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Texas Alliance for Life			00051076
4	Date	5 Full name of contributor Out-of-state PAC (ID#	·· )	7 Amount of Contribution (\$)
	01/23/2024	Roady, Jack & Nisha	)	\$100.00
	01/23/2024	-		
		6 Contributor address; City; State; Zip Code		
		Santa Fe, TX 77510		
_	Dringinglaggy			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)
	District Attor		Galveston County	
	Date	Full name of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)
	01/23/2024	Robinson, Becky		\$25.00
		Contributor address; City; State; Zip Code		
		Austin, TX 78757		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	Retired			
	Date	Full name of contributor Out-of-state PAC (ID#	·	Amount of Contribution (\$)
	01/23/2024		:)	Amount of Contribution (\$) \$25.00
	01/23/2024	SCHULZE, JAMES & PATRICIA		φ20.00
		Contributor address; City; State; Zip Code		
		Copros TV 77204		
	<u> </u>	Conroe, TX 77304		<u> </u>
		pation / Job title (See Instructions)	Employer (See Instructions	5)
	VETERINAR	(IAN	Self	
	Date	Full name of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)
	01/23/2024	Samuelson, Brett & Billie		\$10.00
		Contributor address; City; State; Zip Code		
		Taylor, TX 76574		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	Veterinary T	ech, Student		
	Date	Full name of contributor Out-of-state PAC (ID#	·· )	Amount of Contribution (\$)
	01/23/2024		·)	\$10.00
	01/23/2024	Schero, Donna		\$10.00
		Contributor address; City; State; Zip Code		
		Fort Worth, TX 76109	-i	
		pation / Job title (See Instructions)	Employer (See Instructions	5)
	Registered N	lurse		
			•	

#### SCHEDULE A1

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 5/6 Rpt: 43/44
2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
Texas Alliance for Life	00051076
4 Date 5 Full name of contributor out-of-state PAC (ID#: )	7 Amount of Contribution (\$)
01/23/2024 Shirk, Lynn	\$50.00
6 Contributor address; City; State; Zip Code	
Bastrop, TX 78602	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	l;)
RE Appraiser	, ,
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/23/2024 Skowbo, James	\$25.00
	Ψ_0.00
Contributor address; City; State; Zip Code	
Georgetown, TX 78633	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	() ()
Self Employed	
	Amount of Contribution (\$)
Date Full name of contributor out-of-state PAC (ID#:)   01/23/2024 Smith, Clark	Amount of Contribution (\$) \$25.00
	Ψ20.00
Contributor address; City; State; Zip Code	
Austin, TX 78750	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Attorney	
	Amount of Contribution (\$)
Date Full name of contributor out-of-state PAC (ID#:)   01/23/2024 Umstattd, Thomas & Margaret	Amount of Contribution (\$) \$50.00
	φου.υυ
Contributor address; City; State; Zip Code	
Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	A Contraction of the second seco
Podcaster	
Date Full name of contributor out-of-state PAC (ID#:)	
01/00/0001 L Milacation Flicaboth	Amount of Contribution (\$)
01/23/2024 Wheatley, Elisabeth	Amount of Contribution (\$) \$50.00
01/23/2024 Wheatley, Elisabeth Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code Georgetown, TX 78626	\$50.00
Contributor address; City; State; Zip Code Georgetown, TX 78626 Principal occupation / Job title (See Instructions) Employer (See Instructions)	\$50.00
Contributor address; City; State; Zip Code Georgetown, TX 78626	\$50.00

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 6/6 Rpt: 44/44
2 FILER NAME Texas Alliance for Life	3 Filer ID (Ethics Commission Filers) 00051076
4 Date   5 Full name of contributor   out-of-state PAC (ID#:)     01/23/2024   Wilson, Roger and Peggy Stark     6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) 
Jonestown, TX 78645	
8   Principal occupation / Job title (See Instructions)   9   Employer (See Instruction     Retired Pastor   9	ns)