FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00028135 3 COMMITTEE NAME **OFFICE USE ONLY** Texans for Lawsuit Reform PAC Date Received **ELECTRONICALLY FILED** 02/26/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 919 Congress Ave., Ste. 455 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78701 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Fred NAME NICKNAME LAST **SUFFIX** Heldenfels IV STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 919 Congress Ave., Ste. 455 STREET **ADDRESS** (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1233 W Loop S MAILING **ADDRESS** Ste 1375 Houston, TX 77027 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 478-0200 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/26/2024 02/24/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 03/05/2024 General Special

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texans for Lawsuit Re	form PAC			000281	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported The	Honorable Stephen P. A	Allison State	e Representative
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	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.)				
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRI OR GUARANTEES OF IADE ELECTRONICAL qualifies for the higher ite	LLY)	\$	0.0
	2. TOTAL POLITICA (OTHER THAN PLE	\$	576,600.0		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES				64.0
	4. TOTAL POLITICA	L EXPENDITURES		\$	6,552,711.0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTING	ST DAY \$	29,426,112.6		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE I	F THE \$	0.0		
6 AFFIDAVIT					
		true and	or affirm, under penalty of d correct and includes all inf itle 15, Election Code.		
			Mr. Fred	l Heldenfels	IV
			Signature of 0		
AFFIX NOTAR	Y STAMP / SEAL ABOVE				
Sworn to and subscribe	d before me, by the said			, this the _	day
	, 20, to certify \				
Signature of officer a	dministering oath	Printed name of office	r administering oath	Title of	officer administering oath

FORM GPAC ADDENDUM

Page 3 of 86

12	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
	Texans for Lawsuit Refo	orm PAC			00028135
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Trenton E. Ashby	State 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.)		The Honorable Ernest J. Bailes I	V State 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		
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Roland G. Barrer	a State 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.)			
			l		

FORM GPAC ADDENDUM

Page 4 of 86

12 COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Texans for Lawsuit Re	eform PAC			00028135
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Jeffrey J. Bauknight State F	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		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Gregory Bell Sta	ate Representative
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable James Gregory	Bonnen State 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		
	Officeholders Assisted (Identify by name or, if			

FORM GPAC ADDENDUM

Page 5 of 86

COMMITTEE NAME				
				13 Filer ID (Ethics Commission Filers)
Texans for Lawsuit Refo	orm PAC			00028135
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Benjamin C. Bun	ngarner State 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.)		The Honorable DeWayne C. Bur	ns State 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	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Dustin R. Burrow	s State 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		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	ACTIVITY Attach lists on plain paper to complete this eport if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this eport if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this eport if necessary.)	Activity Actach lists on plain paper to complete this eport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) Actach lists on plain paper to complete this eport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 4. Candidates (Identify by name or, if applicable, classify by party.) 5. Committee ACTIVITY 4. Attach lists on plain paper to complete this eport if necessary.) 5. Committee ACTIVITY 6. Attach lists on plain paper to complete this eport if necessary.) 7. Candidates (Identify by name or, if applicable, classify by party.) 8. Committee ACTIVITY 9. Attach lists on plain paper to complete this eport if necessary.) 1. Candidates (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	ACTIVITY Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) Attach lists on plain paper to complete this report if necessary.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) Attach lists on plain paper to complete this report if necessary.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) Attach lists on plain paper to complete this report if necessary.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 4. Supported Described Processory. 4. Supported Described Processory. 5. Measures (Described Processory). 6. Opposed B. Opposed B. Opposed Described Processory.	Attach lists on plain paper to complete this eport if necessary.) 2. Measures (Describe by date and location of election and nature of Issue) 3. Officeholders Assisted (Describe by Jamen or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of Issue) 3. Officeholders (Describe by Jamen or, if applicable, classify by party.) 2. Measures (Describe by Jamen or, if applicable, classify by party.) 3. Officeholders (Describe by Jamen or, if applicable, classify by party.) 3. Officeholders (Describe by Jamen or, if applicable, classify by party.) 4. Supported The Honorable DeWayne C. Bur (Describe by Jamen or, if applicable, classify by party.) 5. Opposed Dewayne C. Bur (Describe by Jamen or, if applicable, classify by party.) 6. Opposed Dewayne C. Bur (Describe by Jamen or, if applicable, classify by party.) 7. Matach lists on plain paper to complete this eport if necessary.) 8. Opposed Dewayne C. Bur (Describe by Jamen or, if applicable, classify by party.) 8. Opposed Dewayne C. Bur (Describe by Jamen or, if applicable, classify by party.) 8. Opposed Dewayne C. Bur (Describe by Jamen or, if applicable, classify by party.) 8. Opposed Devayne C. Bur (Describe by Jamen or, if applicable, classify by party.) 8. Opposed Devayne C. Bur (Describe by Jamen or, if applicable, classify by party.) 8. Opposed Devayne C. Bur (Describe by Jamen or, if applicable, classify by party.) 8. Opposed Devayne C. Bur (Describe by Jamen or, if applicable, classify by party.) 9. Opposed Devayne C. Bur (Describe by Jamen or, if applicable, classify by party.) 9. Opposed Devayne C. Bur (Describe by Jamen or, if applicable, classify by party.) 9. Opposed Devayne C. Bur (Describe by Jamen or, if applicable, classify by party.) 1. Candidates (Describe by Jamen or, if applicable, classify by party.) 1. Candidates (Describe by Jamen or, if applicable, classify by party.) 1. Candidates (Describe by Jamen or, if applicable, classify by party.) 1. Candidates (Describe by Jame

FORM GPAC ADDENDUM

Page 6 of 86

COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Texans for Lawsuit Refo	orm PAC			00028135
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Angle C. Button	State Representative
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	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	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Briscoe R. Cain	State 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		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Giovanni S. Cap	riglione State Representative
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	Texans for Lawsuit Reform PAC COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted 3. Officeholders Assisted 3. Officeholders Assisted	Texans for Lawsuit Reform PAC COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE (Identify by name or, if applicable, classify by party.) COMMITTEE (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted 3. Officeholders Assisted 3. Officeholders Assisted	Texans for Lawsuit Reform PAC COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) A. Supported Describe by date and testing of describe the party. A. Supported Describe by date and testing or if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) A. Supported Describe by date and location and nature of resule.) B. Opposed The Honorable Angie C. Button The Honorable Briscoe R. Cain A. Supported The Honorable Briscoe R. Cain A. Supported Describe by date and location and nature of resule.) B. Opposed The Honorable Briscoe R. Cain A. Supported The Honorable Briscoe R. Cain The Honorable Briscoe R. Cain A. Supported The Honorable Briscoe R. Cain A. Supported Describe by date and location and nature of resule.) B. Opposed The Honorable Briscoe R. Cain The Honorable Briscoe R. Cain A. Supported Describe by date and location and nature of resule.) B. Opposed The Honorable Briscoe R. Cain The Honorable Briscoe R. Cain The Honorable Giovanni S. Cap Georgia by party. A. Supported Describe by date and location and result of applicable, classify by party.) Describe By date and location and result of describe and location of describe and results of describe and

FORM GPAC ADDENDUM

Page 7 of 86

COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texans for Lawsuit Refo	orm PAC			00028135	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable C. Brandon Creiq	ghton State Se	nator
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	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	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Patrick J. Curry 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			
	Assisted (Identify by name or, if				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Drew Darby Stat	te 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			
	Officeholders Assisted (Identify by name or, if)				
	COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	Texans for Lawsuit Reform PAC COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted 3. Officeholders Assisted 3. Officeholders Assisted	Texans for Lawsuit Reform PAC COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 1. Candidates (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE 1. Candidates (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted 3. Officeholders Assisted	Texans for Lawsuit Reform PAC COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE (Actach lists on plain paper to complete this report if necessary.) COMMITTEE (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) COMMITTEE (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.)	Texans for Lawsuit Reform PAC COMMITTEE ACTIVITY Committee C

FORM GPAC **ADDENDUM**

						Page 8 01 86
COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texans for Lawsuit Refo	orm PAC				00028135	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		rted	The Honorable Jay Dean State	e Representativ	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. Suppo	rted			
		B. Oppos	ed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		rted	The Honorable Emilio F. DeAya	ala State Repre	esentative
(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	Candidates (Identify by name or, if applicable, classify by party.)		rted	Mrs. Jill S. Dutton State Repre	sentative	
(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			
	Officeholders Assisted (Identify by name or, if)					
	applicable, classify by party.)					

FORM GPAC ADDENDUM

Page 9 of 86

COMMITTEE NAME Fexans for Lawsuit Refo	orm DAC			13 Filer ID (Ethics Commission Filers)
Texans for Lawsuit Refo	rm DAC			
	JIII PAC			00028135
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Paul A. Dyson State Repres	entative
Attach lists on plain paper to complete this eport if necessary.)		B. Opposed		
	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	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Frederick E. Fraz	zier State Representative
Attach lists on plain paper to complete this eport 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	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Stanley Arthur G	erdes State Representative
Attach lists on plain paper to complete this eport 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.)			
	Attach lists on plain aper to complete this eport if necessary.) COMMITTEE CTIVITY Attach lists on plain aper to complete this	(Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) Attach lists on plain aper to complete this apport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE CTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) Attach lists on plain aper to complete this apport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if application of election and nature of issue.)	(Describe by date and location of election and nature of issue.) 3. Officeholders	(Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by parry.) Attach lists on plain aper to complete this sport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by parry.) B. Opposed 4. Supported A. Supported B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by parry.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by parry.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by parry.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by parry.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by parry.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by parry.) B. Opposed

FORM GPAC ADDENDUM

Page 10 of 86

					1 age 10 01 00
12	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
	Texans for Lawsuit Refo	orm PAC			00028135
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Brent Hagenbuch 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	1. Candidates	A. Supported	The Honorable Eric Harless Sta	te Representative
	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	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	The Honorable Cody J. Harris S	tate 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		
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
		1 , , , , , , , , , , , , , , , , ,	l		

FORM GPAC ADDENDUM

Page 11 of 86

12 COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Texans for Lawsuit R	eform PAC			00028135
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Joseph Cole Hefi	ner State Representative
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Lacey M. Hull St	ate Representative
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Jacey R. Jetton	State Representative
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			

FORM GPAC ADDENDUM

Page 12 of 86

COMMITTEE NAME				
SOMMITTEE WANE				13 Filer ID (Ethics Commission Filers)
Texans for Lawsuit Refo	orm PAC			00028135
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Venton C. Jones	Jr. State Representative
Attach lists on plain paper to complete this eport if necessary.)		B. Opposed		
	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.)		The Honorable Alex Kamkar Sta	ate Representative
Attach lists on plain paper to complete this eport if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Kenneth P. King	State Representative
Attach lists on plain paper to complete this eport if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	Attach lists on plain paper to complete this eport if necessary.) COMMITTEE ACTIVITY Attach lists on plain paper to complete this eport if necessary.)	ACTIVITY Attach lists on plain paper to complete this eport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) Attach lists on plain paper to complete this eport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders (Identify by name or, if applicable, classify by party.) 3. Officeholders (Identify by name or, if applicable, classify by party.) 3. Officeholders (Identify by name or, if applicable, classify by party.) 3. Officeholders (Identify by name or, if applicable, classify by party.) 3. Officeholders (Identify by name or, if applicable, classify by party.)	A. Supported (dentify by name or, if applicable, classify by party.) A. Supported (dentify by name or, if applicable, classify by party.) A. Supported (Describe by date and location of election and nature of issue.) A. Supported (Describe by date and location of election and nature of issue.) A. Supported (Describe by name or, if applicable, classify by party.) D. COMMITTEE (Describe by date and location of election and nature of issue.) A. Supported (Describe by date and location of election and nature of issue.) B. Opposed COMMITTEE (Describe by date and location of election and nature of issue.) B. Opposed B. Opposed B. Opposed COMMITTEE (Describe by date and location of election and nature of issue.) B. Opposed COMMITTEE (Describe by date and location of election and nature of issue.) B. Opposed COMMITTEE (Describe by date and location of election and nature of issue.) COMMITTEE (Describe by date and location of election and nature of issue.) B. Opposed COMMITTEE (Describe by date and location of election and nature of issue.) COMMITTEE (Describe by date and location of election and nature of issue.) B. Opposed COMMITTEE (Describe by date and location of election and nature of issue.) COMMITTEE (Describe by date and location of election and nature of issue.) COMMITTEE (Describe by date and location of election and nature of issue.) COMMITTEE (Describe by date and location of election and nature of issue.) COMMITTEE (Describe by date and location of election and nature of issue.)	Attach lists on plain paper to complete this eport if necessary.) 2. Measures Obscribe by date and location of election and nature of issue) 3. Officeholders Assisted Obscribe by date and location of election and nature of issue) 3. Officeholders Assisted Obscribe by date and location of election and nature of issue) 4. Supported 5. Opposed 3. Officeholders Assisted Obscribe by date and location of election and nature of issue) 5. Opposed 6. Opposed 7. A. Supported Obscribe by date and location of election and nature of issue of its applicable, classify by party. 7. Opposed 8. Opposed 7. A. Supported Obscribe by date and location of election and nature of issue. 8. Opposed 8. Opposed 8. Opposed 8. Opposed 9. Opposed 9. Opposed 9. Opposed 9. Opposed 9. Opposed 9. Opposed 1. Candidates Obscribe by date and location of election and nature of issue. 9. Opposed 9. Opposed 1. Candidates Obscribe by date and location and nature of issue. 9. Opposed 1. Candidates Obscribe by date and location and nature of issue. 1. Candidates Obscribe by date and location of election and nature of issue. 1. Candidates Obscribe by date and location of election and nature of issue. 1. Candidates Obscribe by date and location of election and nature of issue. 1. Candidates Obscribe by date and location of election and nature of issue. 1. Candidates Obscribe by date and location of election and nature of issue. 1. Candidates Obscribe by date and location of election and nature of issue. 1. Candidates Obscribe by date and location of election and nature of issue. 1. Candidates Obscribe by date and location of election and nature of issue. 1. Opposed

FORM GPAC ADDENDUM

Page 13 of 86

COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Texans for Lawsuit Refo	orm PAC			00028135
	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Oliver S. Kitzmar	n Jr. State Representative
paper to complete this		B. Opposed		
	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.)			
	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Stephanie D. Klid	ck State Representative
paper to complete this		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable John L. Kuempel	State Representative
paper to complete this		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if)			
	COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	Texans for Lawsuit Reform PAC COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted 3. Officeholders Assisted 3. Officeholders Assisted	Texans for Lawsuit Reform PAC COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 1. Candidates (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE 1. Candidates (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted 3. Officeholders Assisted	Texans for Lawsuit Reform PAC COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE (Actach lists on plain paper to complete this report if necessary.) COMMITTEE (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) COMMITTEE (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.) (Actach lists on plain paper to complete this report if necessary.)

FORM GPAC ADDENDUM

Page 14 of 86

COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Texans for Lawsuit Refo	orm PAC			00028135
	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Standard D. Lam	bert State Representative
paper to complete this		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Jeff C. Leach Sta	ate Representative
paper to complete this		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Morgan D. Meyer	r State Representative
paper to complete this		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.)			
		Texans for Lawsuit Reform PAC COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 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.) 2. Measures (Describe by date and location of election and nature of issue.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Identify by name or, if applicable, classify by party.) 2. Measures (Identify by name or, if applicable, classify by party.) 2. Measures (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted 1. Candidates (Identify by name or, if applicable of issue.) 3. Officeholders Assisted 3. Officeholders Assisted 3. Officeholders Assisted	Texans for Lawsuit Reform PAC COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE (Identify by name or, if applicable, classify by party.) COMMITTEE (Identify by name or, if applicable, classify by party.) COMMITTEE (Identify by name or, if applicable, classify by party.) COMMITTEE (Identify by name or, if applicable, classify by party.) COMMITTEE (Attach lists on plain paper to complete this report if necessary.) COMMITTEE 1. Candidates (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY 2. Measures (Identify by name or, if applicable, classify by party.) B. Opposed COMMITTEE 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed COMMITTEE A. Supported Gescribe by date and location of election and nature of issue.) B. Opposed COMMITTEE A. Supported B. Opposed	Texans for Lawsuit Reform PAC COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) A. Supported Describe by date and location and nature of section and nature of section. A. Supported The Honorable Standard D. Lam A. Supported B. Opposed The Honorable Jeff C. Leach Standard D. Lam A. Supported The Honorable Jeff C. Leach Standard D. Lam A. Supported The Honorable Jeff C. Leach Standard D. Lam A. Supported Describe by date and location of election and nature of section

FORM GPAC ADDENDUM

Page 15 of 86

12 COMMITTEE NAME					13 Filer ID	(Ethics Commis	ssion Filers)
Texans for Lawsuit Ref	orm PAC				00028135		
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Canda	ce T. Noble	e State Repres	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					
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Vincent Perez Sta	te 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					
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Glenn	M. Rogers	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					
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
	Assisted (Identify by name or, if						

FORM GPAC ADDENDUM

Page 16 of 86

12	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
	Texans for Lawsuit Refo	orm PAC			00028135
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Matt F. Shaheen	State 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.)		The Honorable Hugh D. Shine S	state 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	Candidates (Identify by name or, if applicable, classify by party.)		Mrs. Joanne W. Shofner State F	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.)			

FORM GPAC ADDENDUM

Page 17 of 86

12	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
	Texans for Lawsuit Refo	orm PAC			00028135
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Hatch C. Smith J	r. State 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.)		The Honorable Reginald Smith	State 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		
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable David L. Spiller	State 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		
		Officeholders Assisted (Identify by name or, if			

FORM GPAC **ADDENDUM**

					Page 18 01 86
COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texans for Lawsuit Refo	orm PAC			00028135	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Lynn D. Stucky	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 ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Kronda Thimeso	h State Repres	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			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Ellen Troxclair S	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			
	Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 19 of 86

COMMITTEE NAME Fexans for Lawsuit Refo	DAG			13 Filer ID (Ethics Commission Filers)
Texans for Lawsuit Refo	DAO			
	orm PAC			00028135
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Gary W. VanDea	aver State Representative
Attach lists on plain paper to complete this eport if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mrs. Denise Villalobos State Re	epresentative
Attach lists on plain paper to complete this peport 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	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Terry M. Wilson	State Representative
Attach lists on plain paper to complete this eport 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 Attach lists on plain report if necessary.) COMMITTEE ACTIVITY Attach lists on plain report if necessary.)	2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) Attach lists on plain apper to complete this eport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 4. Candidates (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) Attach lists on plain apper to complete this eport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE (CTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted A. Supported B. Opposed B. Opposed 3. Officeholders Assisted A. Supported B. Opposed	aper to complete this eport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (deentity by name or, if applicable, classify by party.) 2. COMMITTEE (CTIVITY Attach lists on plain aper to complete this eport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (deentity by name or, if applicable, classify by party.) 4. Supported Mrs. Denise Villalobos State Rescription of the complete of this end to complete this eport if necessary.) 5. Measures (Describe by date and location of election and nature of issue.) 6. Opposed 7. Supported (Describe by date and location of election and nature of issue.) 8. Opposed 8. Opposed 8. Opposed 9. Opposed 1. Candidates (deentity by name or, if supplicable, classify by party.) 8. Opposed 9. Opposed 1. Candidates (deentity by name or, if supplicable, classify by party.) 8. Opposed 9. Opposed 1. Candidates (deentity by name or, if supplicable, classify by party.) 1. Candidates (deentity by name or, if supplicable, classify by party.) 1. Candidates (deentity by name or, if supplicable, classify by party.)

FORM GPAC ADDENDUM

Page 20 of 86

				Fage 20 01 00
12 COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Texans for Lawsuit Refo	orm PAC			00028135
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Charles L. Geren	State 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	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Justin A. Holland	State 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.)			

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

					21 of 86
17 CC	MMITTI	EE NAME	18 Filer ID	(Ethics Com	mission Filers)
Te	xans fo	r Lawsuit Reform PAC	00028135		
		E SUBTOTALS SCHEDULE		SUBTO	OTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	576,600.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (DRGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	5	\$	6,552,711.01
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	Х	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	1,307,546.53
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	1,181,588.13

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 1/4 Rpt: 22/86	
2	FILER NAME Texans for L	.awsuit Reform PAC			3	Filer ID (Ethics Commission 00028135	n Filers)
4	Date 02/22/2024	5 Full name of contributor Alexander, Dan (Mr.)6 Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77007-6132					
8		pation / Job title (See Instructions)	9	1 7 (Of Houston	
	Homebuilder			Alexander Custom hom	es		
	Date 02/21/2024	Full name of contributor Bennett, Monty (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$) \$	25,000.00
		Dallas, TX 75254-1319					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Real Estate			Ashford Hospitality Trus	st		
	Date 01/26/2024	Full name of contributor Binash, Brian W. (Mr.)	out-of-state PAC (ID#:			Amount of Contribution (\$)	10,000.00
		Contributor address; City; Sta Houston, TX 77219-1636	ate; Zip Code		•		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Investor			Binash Investment, L.P.			
	Date 02/06/2024	Full name of contributor Bittick, Sheryl (Mrs.) Contributor address; City; Sta	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$100.00
		Houston, TX 77027-9128					
	Principal occu Insurance	pation / Job title (See Instructions)		Employer (See Instructions BXS Insurance	5)		
	Date 02/16/2024	Full name of contributor Canterbury, Embry (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$) \$	25,000.00
		Houston, TX 77056-2728					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
L	Oil & Gas Ex	kploration		Hibernia Resources III,	LL(<u> </u>	

	MONEI	ARY POLITICAL CONTRIBUTIO	PΝ	IS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 2/4 Rpt: 23/86
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Texans for L	awsuit Reform PAC				00028135
4	Date 01/29/2024	 Full name of contributor ut-of-state PAC (ID#:_ Holmes, James (Mr.) Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$) \$500.00
•	Drive in all account	Dallas, TX 75201-3055	_	Franks or (Coo Instruction		
8	Oil & Gas	pation / Job title (See Instructions)	9	Employer (See Instructions Robur LLC	5)	
	Date 02/02/2024	Full name of contributor out-of-state PAC (ID#:_ Hornstein, Charles (Mr.) Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$1,000.00
		Frederick, MD 21701-2217			<u> </u>	
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)	
	Date 02/16/2024	Full name of contributor out-of-state PAC (ID#:_ Hunt, W. L. (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$50,000.00
		El Paso, TX 79901-1225				
	Principal occu Builder	pation / Job title (See Instructions)		Employer (See Instructions Hunt Building Corporation		
	Date 02/22/2024	Full name of contributor out-of-state PAC (ID#:_ McCoy, Brian F. (Mr.) Contributor address; City; State; Zip Code San Marcos, TX 78667-1028				Amount of Contribution (\$) \$3,000.00
	•	pation / Job title (See Instructions) Gardening Supplies		Employer (See Instructions McCoy Corp.	5)	
	Date 02/09/2024	Full name of contributor out-of-state PAC (ID#:_ McGuyer, Frank B. (Mr.) Contributor address; City; State; Zip Code Houston, TX 77063-1521)		Amount of Contribution (\$) \$100,000.00
	Principal occu Homebuilder	pation / Job title (See Instructions)		Employer (See Instructions McGuyer Hombuilders,		:.

	MONET	ARY POLITICAL CONTRI	IBUTION	S		SCHEDULE A1
	The Instru	ction Guide explains how to compl	ete this form	ı.	1	Total pages Schedule A1: Sch: 3/4 Rpt: 24/86
2	FILER NAME Texans for L	awsuit Reform PAC			3	Filer ID (Ethics Commission Filers) 00028135
4	Date 02/15/2024	 5 Full name of contributor out-of-state out-of-	te PAC (ID#:		7	Amount of Contribution (\$) \$100,000.00
		Austin, TX 78746-5759				
8	Principal occu Real Estate	pation / Job title (See Instructions)		Employer (See Instructions OHT Partners	5)	
	Date 02/16/2024	Full name of contributor out-of-state Richards Sr., Mike (The Honorable) Contributor address; City; State; Zip Code Sugar Land, TX 77478-3540	te PAC (ID#:			Amount of Contribution (\$) \$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)	
	Investments			Bethesda Capital, LLC		
	Date 02/15/2024	Sanders, Rodger (Mr.) Contributor address; City; State; Zip Code	te PAC (ID#:)		Amount of Contribution (\$) \$200,000.00
	Principal occu	Plano, TX 75024-3674 pation / Job title (See Instructions)		Employer (See Instructions	·, 	
		r Single Family Homes		Highland Homes	•)	
	Date 02/05/2024	Full name of contributor out-of-state Sinclair, Donald R. (Mr.) Contributor address; City; State; Zip Code West University Place, TX 77005-210	Э)		Amount of Contribution (\$) \$25,000.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)	
	Date 01/31/2024	Full name of contributor out-of-state Tack Development LTD Contributor address; City; State; Zip Code	te PAC (ID#:			Amount of Contribution (\$) \$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	S)	
			1			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 4/4 Rpt: 25/86	
2	FILER NAME Texans for L	_awsuit Reform PAC		3	Filer ID (Ethics Commission 00028135	n Filers)
4	Date 02/22/2024	 Full name of contributor		7	Amount of Contribution (\$) \$	310,000.00
8	Principal occu	Philadelphia, PA 19192 upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 02/12/2024	Full name of contributor out-of-state PAC (ID#: Valach, Kenneth J. (Mr.) Contributor address; City; State; Zip Code Houston, TX 77024-3914			Amount of Contribution (\$)	20,000.00
	Principal occu Real Estate	upation / Job title (See Instructions)	Employer (See Instructions Crow Holdings Develop		ent	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Cabadula F1:	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1: Sch: 1/55 Rpt: 26/86	2 FILER NAME Texans for Lawsuit Reform PAC 3 Filer ID (Ethics Commission Filers) 00028135
4 Date	5 Payee name
02/13/2024	Alex Kamkar Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$75,000.00	3422 Business Center Drive Ste 106 #148
Expenditure from corporate funds	Pearland, TX 77584
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/29/2024	Alex Kamkar Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$85,000.00	3422 Business Center Drive Ste 106 #148
Expenditure from corporate funds	Pearland, TX 77584
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
_/	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	
Date	Payee name
02/20/2024	Allyn Political LLC
Amount (\$)	Payee address; City; State; Zip Code
\$200,000.00	3838 Oak Lawn Avenue Suite 400
Expenditure from	
corporate funds	Dallas, TX 75214
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In Kind: Political Advertising
	in talia. I oliuda / avoluding
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	y

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total manua Cabadula F1.	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1: Sch: 2/55 Rpt: 27/86	2 FILER NAME Texans for Lawsuit Reform PAC 3 Filer ID (Ethics Commission Filers) 00028135
4 Date	5 Payee name
01/30/2024	Anedot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$644.70	555 Hilton Ave Ste 106
Expenditure from corporate funds	Baton Rouge, LA 70808
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Fees for processing multiple credit card contributions 1/30/24-2/7/24
	1/30/24-2/1/24
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/26/2024	Atchley & Associates LLP
Δ == 0 == ± (Φ)	
Amount (\$)	Payee address; City; State; Zip Code
\$2,467.50	1005 La Posada Drive
— Forest diture from	
Expenditure from corporate funds	Austin, TX 78752
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	PAC Accounting and Reporting Services
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/23/2024	Atchley & Associates LLP
Amount (\$)	Payee address; City; State; Zip Code
\$1,457.50	1005 La Posada Drive
- Evnanditure free-	
Expenditure from corporate funds	Austin, TX 78752
PURPOSE	
OF	
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	PAC Accounting and Reporting Services
Operation Children	Open Highest (Office health and a second sec
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	<u> </u>

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenolder/Politica	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	$\overline{}$
Sch: 3/55 Rpt: 28/86	Texans for Lawsuit Reform PAC 00028135	
4 Date	5 Payee name	
02/08/2024	Befeld, Amy	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,000.00	1233 West Loop S Suite 1375	
- "		
Expenditure from corporate funds	Houston, TX 77027	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense PAC Staff Salaries	
	PAC Stall Salaties	
• O I O O O O O O O O O O O O O O O O O		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
<u> </u>		
Date	Payee name	
02/22/2024	Ben Bumgarner Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$5,500.00	5150 Kensington Court	
Expenditure from	Flower Mound, TX 75022	
corporate funds	Hower Mound, 17 19922	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Candidate/Officeholder name (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution Candidate/Officeholder name Office sought Office held	
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Ol	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Candidate/Officeholder name (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution Candidate/Officeholder name Office sought Office held	
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Candidate/Officeholder name Office sought Office held Payee name	
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Ol	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Office sought Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution Office held	
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Candidate/Officeholder name Office sought Office held Payee name	
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/07/2024	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Office sought Payee name Brent Hagenbuch Campaign (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution Office held	
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/07/2024 Amount (\$) \$25,000.00	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Campaign Contribution Candidate/Officeholder name Office sought Payee name Brent Hagenbuch Campaign Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/07/2024 Amount (\$)	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Campaign Contribution Candidate/Officeholder name Office sought Payee name Brent Hagenbuch Campaign Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/07/2024 Amount (\$) \$25,000.00	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Office sought Payee name Brent Hagenbuch Campaign Payee address; City; State; Zip Code 2800 Shoreline Drive #310 (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution Office held Office held Denton, TX 76210	
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/07/2024 Amount (\$) \$25,000.00 Expenditure from corporate funds PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Office sought Payee name Brent Hagenbuch Campaign Payee address; City; State; Zip Code 2800 Shoreline Drive #310 (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Iving expense Campaign Contribution Office held Office held Denton, TX 76210	
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/07/2024 Amount (\$) \$25,000.00 Expenditure from corporate funds PURPOSE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Office sought Office held Payee name Brent Hagenbuch Campaign Payee address; City; State; Zip Code 2800 Shoreline Drive #310 Denton, TX 76210 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/07/2024 Amount (\$) \$25,000.00 Expenditure from corporate funds PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Office sought Office held Payee name Brent Hagenbuch Campaign Payee address; City; State; Zip Code 2800 Shoreline Drive #310 Denton, TX 76210 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if ravel outside of Texas. Complete Schedule T. Check if ravel outside of Texas. Complete Schedule T.	
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/07/2024 Amount (\$) \$25,000.00 Expenditure from corporate funds PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Office sought Candidate/Officeholder name Office sought Office held Payee name Brent Hagenbuch Campaign Payee address; City; State; Zip Code 2800 Shoreline Drive #310 Denton, TX 76210 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Campaign Contribution (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution	
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/07/2024 Amount (\$) \$25,000.00 Expenditure from corporate funds PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Campaign Contribution Candidate/Officeholder name Office sought Office held Payee name Brent Hagenbuch Campaign Payee address; City; State; Zip Code 2800 Shoreline Drive #310 Denton, TX 76210 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Campaign Contribution (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution Campaign Contribution	
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/07/2024 Amount (\$) \$25,000.00 Expenditure from corporate funds PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Campaign Contribution Candidate/Officeholder name Office sought Office held Payee name Brent Hagenbuch Campaign Payee address; City; State; Zip Code 2800 Shoreline Drive #310 Denton, TX 76210 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Campaign Contribution (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution Campaign Contribution	
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/07/2024 Amount (\$) \$25,000.00 Expenditure from corporate funds PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Campaign Contribution Candidate/Officeholder name Office sought Office held Payee name Brent Hagenbuch Campaign Payee address; City; State; Zip Code 2800 Shoreline Drive #310 Denton, TX 76210 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Campaign Contribution (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution Campaign Contribution	
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OI Date 02/07/2024 Amount (\$) \$25,000.00 Expenditure from corporate funds PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Campaign Contribution Candidate/Officeholder name Office sought Office held Payee name Brent Hagenbuch Campaign Payee address; City; State; Zip Code 2800 Shoreline Drive #310 Denton, TX 76210 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Campaign Contribution (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution Campaign Contribution	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 7 1 0 1 1 5	,
Total pages Schedule F1: Sch: 4/55 Rpt: 29/86	2 FILER NAME3 Filer ID(Ethics Commission Filers)Texans for Lawsuit Reform PAC00028135
4 Date	5 Payee name
02/13/2024	Briscoe Cain Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$15,000.00	PO Box 7
Expenditure from corporate funds	Deer Park, TX 77536
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Campaigh Continuation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to beliefft C/O	
Date	Payee name
02/08/2024	Calabrese, Denis
Amount (\$)	
\$2,000.00	1233 West Loop S Suite 1375
Evponditure from	
Expenditure from corporate funds	Houston, TX 77027
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	PAC Political Consulting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	o
Date	Payee name
02/01/2024	Candy Noble Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$20,000.00	1105 E Main Street Ste 223
+_0 ,000.00	
Expenditure from	
corporate funds	Allen, TX 75002
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 5/55 Rpt: 30/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/20/2024	Candy Noble Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$100,000.00	1105 E Main Street Ste 223
Expenditure from corporate funds	Allen, TX 75002
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/13/2024	Cole Hefner Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$75,000.00	PO Box 167
Expenditure from corporate funds	Moount Pleasant, TX 75456
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Commission ONII V if dispose	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	· ·
5.	
Date	Payee name
01/30/2024	Cygnal
Amount (\$)	Payee address; City; State; Zip Code
\$11,200.00	900 17th Street NW Suite 950
Evnanditura fra	
Expenditure from corporate funds	Washington, DC 20006
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
EVENDIIOKE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
0 1: 0:::::::::::::::::::::::::::::::::	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
2	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/55 Rpt: 31/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/01/2024	David Spiller Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$15,000.00	PO Box 447
Expenditure from corporate funds	Jacksboro, TX 76458
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/13/2024	David Spiller Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$25,000.00	PO Box 447
Expenditure from corporate funds	Jacksboro, TX 76458
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
02/02/2024	Denise Villalobos Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	10330 Kingsbury Drive
. ,	
Expenditure from corporate funds	Corpus Christi, TX 78410
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By
-	Candidate/Officeholder/Political Committee
	Campaign Continuution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 7/55 Rpt: 32/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/23/2024	Drew Darby Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$25,000.00	PO Box 3284
Expenditure from corporate funds	San Angelo, TX 76902
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/01	<u> </u>
Date	Payee name
02/13/2024	Dustin Burrows Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$9,000.00	PO Box 2569
— Formanditure from	
Expenditure from corporate funds	Lubbock, TX 79408
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
One what ONE Wife disease	One districts (Office health are assets as the control of the health
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
·	
Date	Payee name
02/20/2024	Ellen Troxclair Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$125,000.00	701 Highway 281 Ste H #196
Expenditure from	
corporate funds	Marble Falls, TX 78645
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete CALL V if direct	Candidate/Officeholder name Office cought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 8/55 Rpt: 33/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/16/2024	Fidi Media LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$200,930.00	180 Water St #416
,,	
Expenditure from	Now York, TV 10020
corporate funds	New York, TX 10038
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In Kind: Political Advertising
	in rand. I ontiod / to voltomy
Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/01/2024	Frederick Frazier Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$25,000.00	321 Bachman Creek Drive
Expenditure from corporate funds	McKinney, TX 75072
PURPOSE	-
OF OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	-1
Data	Device same
Date 02/13/2024	Payee name Frederick Frazier Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$75,000.00	321 Bachman Creek Drive
Expenditure from	
corporate funds	McKinney, TX 75072
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 9/55 Rpt: 34/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/20/2024	Frederick Frazier Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$100,000.00	321 Bachman Creek Drive
Expenditure from corporate funds	McKinney, TX 75072
	·
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Garrandato/ Gindon Garrandato
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/15/2024	Friends of Brandon Creighton
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	2257 N Loop 336 W #140-366
Ψ3,000.00	2237 N Loop 330 W #140-300
Expenditure from	
corporate funds	Conroe, TX 77304
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
01/29/2024	Greg Bonnen Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	405 David Street
Expenditure from corporate funds	Friendswood, TX 77546
-	I
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 10/55 Rpt: 35/86	2 FILER NAME Texans for Lawsuit Reform PAC 3 Filer ID (Ethics Commission Filers) 00028135
4 Date	5 Payee name
02/01/2024	Hatch Smith Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$50,000.00	603 East Ellis Street
Expenditure from corporate funds	Llano, TX 78643
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/14/2024	Hatch Smith Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$25,000.00	603 East Ellis Street
Ψ20,000.00	Coo Last Line of out
Expenditure from corporate funds	Llano, TX 78643
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/20/2024	Hatch Smith Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$60,000.00	603 East Ellis Street
400,000.00	
Expenditure from corporate funds	Llano, TX 78643
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
D. LIBITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/OI	

SCHEDULE F1

Advertising Expense E Accounting/Banking F Consulting Expense F Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a cottographed listed above)

Candidate/Officeholder/Politica Credit Card Payment		
Credit Card r dyment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 11/55 Rpt: 36/86	Texans for Lawsuit Reform PAC 00028135	
4 Date	5 Payee name	
02/23/2024	Hatch Smith Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$50,000.00	603 East Ellis Street	
Expenditure from corporate funds	Llano, TX 78643	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
	Campaign Contribution	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	1	
Date	Payee name	=
02/14/2024	Houston Region Business Coalition (HRBC PAC)	
Amount (\$)	Payee address; City; State; Zip Code	
\$25,000.00	4500 Bissonnet Street Ste 370	
- Funanditura from		
Expenditure from corporate funds	Bellaire, TX 77401	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By	
EXI ENDITORE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
	Political Contribution	
One what ONE Wife discret	Our did at 10 % as hald a manual of the annual of the shall of the sha	_
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
<u>'</u>		_
Date	Payee name	
02/07/2024	Houston Region Business Coalition (HRBC PAC)	
Amount (\$)	Payee address; City; State; Zip Code	
\$50,000.00	4500 Bissonnet Street Ste 370	
Expenditure from corporate funds	Bellaire, TX 77401	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	Π
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Candidate/Officeholder/Political Committee	
	Political Contribution	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held]
expenditure to benefit C/OI	¬ 	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solarios (Magne) (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outer a category not listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
Sch: 12/55 Rpt: 37/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/20/2024	Houston Region Business Coalition (HRBC PAC)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$20,000.00	4500 Bissonnet Street Ste 370
Expenditure from corporate funds	Bellaire, TX 77401
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/22/2024	Houston Region Business Coalition (HRBC PAC)
Amount (\$)	Payee address; City; State; Zip Code
\$9,000.00	4500 Bissonnet Street Ste 370
Expenditure from corporate funds	Bellaire, TX 77401
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeriolder/Political Committee Political Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
Date	Payee name
02/08/2024	Hovey, Glenda
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	1233 West Loop S Suite 1375
Expenditure from corporate funds	Houston, TX 77027
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
LAI LIIDITORE	Check if Austin, TX, officeholder living expense
	PAC Staff Salaries
2 1: 2111111111	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
5. ponance 12 12 11 11 11 11 11 11 11 11 11 11 11	<u> </u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	
Great Sara r ayment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 13/55 Rpt: 38/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
01/29/2024	Hugh Shine Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 793
Expenditure from corporate funds	Temple, TX 76503
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/01/2024	Jacey Jetton Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$50,000.00	1723 Hearthside Court
Ψου,σου.σο	1720 Houringto Gourt
Expenditure from	Disharand TV 77400
corporate funds	Richmond, TX 77406
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin TV officeholder living supposes
	Candidate/Officeholder/Political Committee Campaign Contribution
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/13/2024	Jeff Bauknight Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$50,000.00	PO Box 4122
Expenditure from corporate funds	Victoria, TX 77903
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
Sch: 14/55 Rpt: 39/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/16/2024	Jeff Bauknight Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$50,000.00	PO Box 4122
Expenditure from corporate funds	Victoria, TX 77903
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/21/2024	Jeff Bauknight Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$75,000.00	PO Box 4122
,	
Expenditure from corporate funds	Victoria, TX 77903
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee Campaign Contribution
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
01/31/2024	Jeff Leach Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$110,000.00	800 Glen Rose Drive
Expenditure from	
corporate funds	Allen, TX 75013
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Carididate/Officeriolder/Political Committee Campaign Contribution
	F3
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
Sch: 15/55 Rpt: 40/86	Texans for Lawsuit Reform PAC 00028135	
4 Date	5 Payee name	_
02/13/2024	Jeff Leach Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	_
\$40,000.00	800 Glen Rose Drive	
Expenditure from corporate funds	Allen, TX 75013	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
	Candidate/Officeholder/Political Committee Campaign Contribution	
	Campaign Continuation	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	H	
Date	Payee name	
02/14/2024	Jill Dutton Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$150,000.00	411 Van Zandt County Road 4503	
Expenditure from corporate funds	Ben Wheeler, TX 75754	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
LXI LINDITORE	Candidate/Officeholder/Political Committee	
	Campaign Contribution	
		_
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
		_
Date	Payee name	
02/20/2024	Joanne Shofner Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$100,000.00	638 N University Drive #177	
Expenditure from corporate funds	Nacogdoches, TX 75961	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
	Candidate/Officeholder/Political Committee Campaign Contribution	
	Campaign Continuation	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Tatal manua Cabadala E4.	,
1 Total pages Schedule F1:	
Sch: 16/55 Rpt: 41/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/01/2024	John Kuempel Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$10,000.00	PO Box 177
Ψ10,000.00	1 O BOX 177
Expenditure from	
corporate funds	Seguin, TX 78156
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	⊣
Date	Douge name
	Payee name
02/21/2024	Judicial Fairness PAC
Amount (\$)	Payee address; City; State; Zip Code
\$250,000.00	919 Congress Avenue Ste 455
Expenditure from corporate funds	Austin, TX 78703
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Political Contribution
	Total Contribution
Complete ONLY if divest	Condidate/Office helder name Office accepts
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/22/2024	Judicial Fairness PAC
Amount (\$)	Payee address; City; State; Zip Code
\$50.00	919 Congress Avenue Suite 455
400.00	old Congress / Worlds Cuite 100
Expenditure from	A . (f TV 70700
corporate funds	Austin, TX 78703
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LA LABITORE	Candidate/Officeholder/Political Committee
	Political Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (other a cottographed listed above)

Candidate/Officeholder/Politica Credit Card Payment	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 17/55 Rpt: 42/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/22/2024	Judicial Fairness PAC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$50.00	919 Congress Avenue Suite 455
Expenditure from corporate funds	Austin, TX 78703
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Political Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
02/22/2024	KC Strategies, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$175,000.00	3571 Far West Blvd Ste 196
, .,	
Expenditure from corporate funds	Austin, TX 78731
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In Kind: Political Advertising
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	⊣
Date	Payee name
02/15/2024	Lawson Strategies, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$7,296.05	1407 Lost Creek Blvd
\$7,290.05	1407 LOSI CIEER BIVU
Expenditure from	
corporate funds	Austin, TX 78746
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In Kind: Campaign Direct Mail
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	,
1 Total pages Schedule F1:	
Sch: 18/55 Rpt: 43/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/20/2024	Lawson Strategies, LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6,278.50	1407 Lost Creek Blvd
\$0,276.50	1407 LOST CIEEK BIVU
Expenditure from	
corporate funds	Austin, TX 78746
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Direct Mail
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Data	David and the second se
Date	Payee name
02/21/2024	Lawson Strategies, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$7,296.05	1407 Lost Creek Blvd
Expenditure from corporate funds	Austin, TX 78746
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In Kind: Campaign Direct Mail
	iii Kiilu. Campaign Direct Maii
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialture to beliefit C/O	
Date	Payee name
02/08/2024	Lawson, Drew
Amount (\$)	Payee address; City; State; Zip Code
` '	
\$4,000.00	1233 West Loop S Suite 1375
Expenditure from	
corporate funds	Houston, TX 77027
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Consulting Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	PAC Political Consulting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	⊣

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Final Services Salaries/Wangs/Contract Labor

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
Sch: 19/55 Rpt: 44/86	Texans for Lawsuit Reform PAC 00028135	
4 Date	5 Payee name	
02/01/2024	Lynn Stucky Campaign	
6 Amount (\$) \$25,000.00	7 Payee address; City; State; Zip Code PO Box 464	
Expenditure from corporate funds	Denton, TX 75202	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By	
ZA ZHBITORZ	Candidate/Officeholder/Political Committee	
	Campaign Contribution	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
02/13/2024	Lynn Stucky Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$100,000.00	PO Box 464	
Expenditure from corporate funds	Denton, TX 75202	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By	
EXI ENDITORE	Candidate/Officeholder/Political Committee	
	Campaign Contribution	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
02/20/2024	Lynn Stucky Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$75,000.00	PO Box 464	
Expenditure from corporate funds	Denton, TX 75202	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By	
ZA ZHBITORZ	Candidate/Officeholder/Political Committee	
	Campaign Contribution	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	\dashv
expenditure to benefit C/OI	y	
		\exists

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 7	
1 Total pages Schedule F1: Sch: 20/55 Rpt: 45/86	2 FILER NAME3 Filer ID(Ethics Commission Filers)Texans for Lawsuit Reform PAC00028135
4 Date	5 Payee name
02/01/2024	Mano DeAyala Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$25,000.00	12335 Kingsride Lane Ste 416
Expenditure from corporate funds	Houston, TX 77024
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/13/2024	Mano DeAyala Campaign
Amount (\$)	Payee address; City; State; Zip Code
` '	
\$75,000.00	12335 Kingsride Lane Ste 416
Expanditure from	
Expenditure from corporate funds	Houston, TX 77024
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder (Political Committee) Check if Austin, TX, officeholder living expense
	Campaign Contribution
	Sampaign Continuation
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/20/2024	Mano DeAyala Campaign
Amount (\$)	Payee address; City; State; Zip Code
` '	
\$116,000.00	12335 Kingsride Lane Ste 416
Expenditure from	
corporate funds	Houston, TX 77024
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign Contribution
Complete CNLV if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 21/55 Rpt: 46/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/08/2024	Martinez, Avery
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	1233 West Loop S Suite 1375
Expenditure from corporate funds	Houston, TX 77027
	1
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	PAC Staff Salaries
	FAC Stall Salaties
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/13/2024	Matt Shaheen Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$100,000.00	3917 Malton Drive
\$100,000.00	3917 Miditori Diive
Expenditure from	
corporate funds	Plano, TX 75025
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
02/08/2024	Nashed, Lucy
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	1233 West Loop S Suite 1375
,_,,,,,,,,,	
Expenditure from	
corporate funds	Houston, TX 77027
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EAPENDITURE	Check if Austin, TX, officeholder living expense
	PAC Staff Salaries
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Giff(Alwards/Me)

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	·
1 Total pages Schedule F1:	
Sch: 22/55 Rpt: 47/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/02/2024	Parsley, E. Lee
	<u> </u>
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	1231 Parkway #1
Expenditure from	Austin, TX 78703
corporate funds	Austin, 17 10103
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.
LXI ENDITORE	Check if Austin, TX, officeholder living expense
	PAC Legal Service
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
02/20/2024	Pat Curry Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	204 Woodhew Drive
\$5,000.00	204 Woodilew Dilve
Expenditure from	
corporate funds	Waco, TX 76712
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Candidate/Officeholder living expense
	Campaign Contribution
	Campaign Continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
02/20/2024	Paul Dyson Campaign
02/20/2024	Faul Dyson Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$3,250.00	4040 Highway 6 Ste 200
Expenditure from	Callaga Station TV 7704E
corporate funds	College Station, TX 77845
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Event Expense Fees Food/Beverage Expense

Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 23/55 Rpt: 48/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/08/2024	Raconteur Media Company
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$376.45	PO Box 26511
Expenditure from corporate funds	Austin, TX 78755
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense PAC Political Advertising
	TACT Official Advertising
Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/08/2024	Raconteur Media Company
Amount (\$)	Payee address; City; State; Zip Code
\$1,307.50	PO Box 26511
Expenditure from corporate funds	Austin, TX 78755
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	PAC Political Consulting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	4
Date	Payee name
01/30/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$28,200.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Polling Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Candidate/Officenolder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 24/55 Rpt: 49/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/01/2024	Ragnar Research Partners LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$30,500.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In Kind: Campaign Polling
	III Kirid. Campaigh Folling
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/05/2024	Ragnar Research Partners LLC
Amount (\$)	
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
LA LIBITORE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to benefit 5/5/	<u></u>
Date	Payee name
02/05/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
70,0000	
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Cor Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
,	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 25/55 Rpt: 50/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/05/2024	Ragnar Research Partners LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/05/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiordire to belieff C/O	
Date	Payee name
02/05/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVDENDITUDE	Polling Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 7	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1: Sch: 26/55 Rpt: 51/86	2 FILER NAME Texans for Lawsuit Reform PAC 3 Filer ID (Ethics Commission Filers) 00028135
4 Date	5 Payee name
02/05/2024	Ragnar Research Partners LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
	in Mid. Campaign Foling
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/05/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Operation ONE Wife discout	On did to 10 ff as hald a grant Off as hald
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/05/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,950.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 7	
1 Total pages Schedule F1: Sch: 27/55 Rpt: 52/86	2 FILER NAME Texans for Lawsuit Reform PAC 3 Filer ID (Ethics Commission Filers) 00028135
4 Date	5 Payee name
02/05/2024	Ragnar Research Partners LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Polling Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/05/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
40,100.00	
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/05/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
φ0,730.00	103 E Sileet SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Polling Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 28/55 Rpt: 53/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/05/2024	Ragnar Research Partners LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from	
corporate funds	Washington, DC 20003
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In Kind: Campaign Polling
	in rand. Campaign rolling
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	-
Date	Payee name
02/05/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
. ,	
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In Kind: Campaign Polling
	in Mid. Campaign Foling
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/05/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Φ0,700.00	100 2 00000 02
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In Kind: Campaign Polling
	iii Kiilu. Campaign Folling
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

Credit Card Payment	The Instruction Guide explains how to complete	e this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 29/55 Rpt: 54/86	Texans for Lawsuit Reform PAC	00028135
4 Date	5 Payee name	
02/05/2024	Ragnar Research Partners LLC	
6 Amount (\$) \$13,500.00	7 Payee address; City; State; Zip Code 103 E Street SE	
Expenditure from corporate funds	Washington, DC 20003	
8 PURPOSE OF EXPENDITURE	Polling Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense N Kind: Campaign Polling
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
02/05/2024	Ragnar Research Partners LLC	
Amount (\$)	Payee address; City; State; Zip Code	
\$6,750.00	103 E Street SE	
Expenditure from corporate funds	Washington, DC 20003	
PURPOSE OF EXPENDITURE	Polling Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Note the Campaign Polling
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
02/05/2024	Ragnar Research Partners LLC	
Amount (\$) \$13,500.00	Payee address; City; State; Zip Code 103 E Street SE	
Expenditure from corporate funds	Washington, DC 20003	
PURPOSE OF EXPENDITURE	Polling Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Kind: Campaign Polling
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Coi

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 30/55 Rpt: 55/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/05/2024	Ragnar Research Partners LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6,950.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
02/05/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experience to belief to 70	
Date	Payee name
02/05/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Polling Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Farman manadak di Arti Filip F	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 31/55 Rpt: 56/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/06/2024	Ragnar Research Partners LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from	
corporate funds	Washington, DC 20003
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiditure to benefit C/Or	
Date	Payee name
02/06/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Funanditura from	
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In Kind: Campaign Polling
	in Kind. Campaign Folling
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	"
Date	Payee name
02/09/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$9,467.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
_/	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 32/55 Rpt: 57/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/12/2024	Ragnar Research Partners LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In Kind: Campaign Polling
	in Rind. Campaign Folling
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/12/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
— Forestitus from	
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/12/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Polling Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 33/55 Rpt: 58/86	Texans for Lawsuit Reform PAC	00028135
4 Date	5 Payee name	
02/12/2024	Ragnar Research Partners LLC	
6 Amount (\$)	7 Payee address; City; State; Zip Co	nde
\$6,750.00	103 E Street SE	au C
ψ0,730.00	100 L 311001 3L	
Expenditure from corporate funds	Washington, DC 20003	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Polling Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		In Kind: Campaign Polling
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight Office held
Date	Payee name	
02/12/2024	Ragnar Research Partners LLC	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$6,750.00	103 E Street SE	
·		
Expenditure from corporate funds	Washington, DC 20003	
PURPOSE		(b) Description
OF	(a) Category (See Categories listed at the top of this schedule) Polling Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	1 Onling Expense	Check if Austin, TX, officeholder living expense
		In Kind: Campaign Polling
Complete ONLY if direct	Candidate/Officeholder name Office sou	ight Office held
expenditure to benefit C/OI	1	
Date	Payee name	
02/14/2024	Ragnar Research Partners LLC	
Amount (\$)	Payee address; City; State; Zip Co	nde
\$6,750.00	103 E Street SE	
φ0,730.00	100 2 31661 32	
Expenditure from corporate funds	Washington, DC 20003	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Polling Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		In Kind: Campaign Polling
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI	٦ 	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 34/55 Rpt: 59/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/14/2024	Ragnar Research Partners LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from	
corporate funds	Washington, DC 20003
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In Kind: Campaign Polling
	in Mid. Campaign Foling
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/14/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In Kind: Campaign Polling
	in rand. Sampagir i Simig
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
02/14/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
, , , , , , , , , , , , , , , , , , , ,	
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In Kind: Campaign Polling
	iii Kiilu. Campaign Folling
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 35/55 Rpt: 60/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/14/2024	Ragnar Research Partners LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to beliefit 6/01	·
Date	Payee name
02/14/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
'	
Date	Payee name
02/14/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
LAFLINDITURE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitie to beliefft C/OI	<u> </u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	
Sch: 36/55 Rpt: 61/86	Texans for Lawsuit Reform PAC 00028135	
4 Date	5 Payee name	
02/14/2024	Ragnar Research Partners LLC	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$6,750.00	103 E Street SE	
Expenditure from corporate funds	Washington, DC 20003	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	In Kind: Campaign Polling	
	In this campaign simily	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O		
Data		_
Date	Payee name	
02/14/2024	Ragnar Research Partners LLC	_
Amount (\$)	Payee address; City; State; Zip Code	
\$6,750.00	103 E Street SE	
Expenditure from corporate funds	Washington, DC 20003	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Polling Expense Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	In Kind: Campaign Polling	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	н	
Date	Payee name	
02/14/2024	Ragnar Research Partners LLC	
Amount (\$)	Payee address; City; State; Zip Code	
\$6,750.00	103 E Street SE	
. ,		
Expenditure from corporate funds	Washington, DC 20003	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	In Kind: Campaign Polling	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experience to benefit even		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Tatal manua Cabadala E4.	
1 Total pages Schedule F1: Sch: 37/55 Rpt: 62/86	2 FILER NAME Texans for Lawsuit Reform PAC 3 Filer ID (Ethics Commission Filers) 00028135
4 Date	5 Payee name
02/14/2024	Ragnar Research Partners LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/15/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
-	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Operation ONE Wife discout	On didn't Office helds
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/20/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In Kind: Campaign Polling
	iii Niiu. Campaign Foiling
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By
Candidate/Officeholder/Political

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 38/55 Rpt: 63/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/20/2024	Ragnar Research Partners LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/20/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to benefit 6/01	'
Date	Payee name
02/20/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
LAFLINDITURE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitie to beliefft C/OI	<u> </u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
·	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 39/55 Rpt: 64/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/20/2024	Ragnar Research Partners LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
02/20/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$6,750.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Polling Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiordire to belieff C/O	
Date	Payee name
02/22/2024	Ragnar Research Partners LLC
Amount (\$)	Payee address; City; State; Zip Code
\$13,500.00	103 E Street SE
Expenditure from corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Polling Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In Kind: Campaign Polling
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 40/55 Rpt: 65/86 Texans for Lawsuit Reform PAC 00028135 4 Date Payee name 02/22/2024 Ragnar Research Partners LLC 6 Amount (\$) Payee address; City; State; Zip Code \$13,500.00 103 E Street SE Expenditure from Washington, DC 20003 corporate funds **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Polling Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense In Kind: Campaign Polling Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/01/2024 Reggie Smith Campaign Amount (\$) Payee address; City; State; Zip Code \$15,000.00 PO Box 1947 Expenditure from Sherman, TX 75091 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign Contribution Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/15/2024 Reggie Smith Campaign Amount (\$) Payee address: City: State; Zip Code \$28,000.00 PO Box 1947 Expenditure from corporate funds Sherman, TX 75091 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign Contribution Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 41/55 Rpt: 66/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/02/2024	Roland Barrera Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$25,000.00	807 N Upper Broadway Suite 102
Expenditure from corporate funds	Corpus Christi, TX 78401
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LAPENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/02/2024	Sam Harless Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	15814 Champion Forest PMB 312
Ψ1,000.00	10014 Onampion Forest Find 012
Expenditure from corporate funds	Spring, TX 77379
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign Continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/21/2024	Secure Our Border Now PAC
Amount (\$)	Payee address; City; State; Zip Code
\$477,500.00	PO Box 341016
Expenditure from corporate funds	Austin, TX 78734
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
_/	Candidate/Officeholder/Political Committee
	Political Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
SAPONGIA. S TO BOHOM OF OF	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Tatal range Cabadula 54:	
1 Total pages Schedule F1: Sch: 42/55 Rpt: 67/86	2 FILER NAME3 Filer ID(Ethics Commission Filers)Texans for Lawsuit Reform PAC00028135
4 Date	5 Payee name
02/01/2024	Stan Gerdes Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code PO Box 1060
\$30,000.00	PO B0X 1000
Expenditure from corporate funds	Smithville, TX 78957
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/06/2024	Stan Gerdes Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$50,000.00	PO Box 1060
Expenditure from corporate funds	Smithville, TX 78957
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONI V if divest	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
Date	Payee name
02/13/2024	Stan Gerdes Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$50,000.00	PO Box 1060
Expenditure from corporate funds	Smithville, TX 78957
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	o

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
rtising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 43/55 Rpt: 68/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/20/2024	Stan Gerdes Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$30,000.00	PO Box 1060
Expenditure from corporate funds	Smithville, TX 78957
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee Campaign Contribution
	Campaign Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	
Date	Payee name
02/01/2024	Stan Kitzman Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	PO Box 553
Expenditure from	
corporate funds	Pattison, TX 77466
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
_/	Candidate/Officeholder/Political Committee
	Campaign Contribution
Operation ONE Wife discont	Our didn't lotter halden games Office accepts
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/13/2024	Stan Kitzman Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$15,000.00	PO Box 553
Expenditure from	
corporate funds	Pattison, TX 77466
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Operation Children	Ora didata (Office hadden grown
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outer a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 44/55 Rpt: 69/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/23/2024	Stan Kitzman Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5,000.00	PO Box 553
\$5,000.00	FO BOX 333
Expenditure from	
corporate funds	Pattison, TX 77466
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	⊣
Date	Douge name
	Payee name
02/01/2024	Stan Lambert Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$10,000.00	PO Box 3752
Expenditure from corporate funds	Abilene, TX 76904
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder (Political Committee) Check if Austin, TX, officeholder living expense
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
Date	Payee name
02/13/2024	Stephanie Klick Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$70,000.00	PO Box 7592
, ,,,,,,,	
Expenditure from	Fout Months TV 70111
corporate funds	Fort Worth, TX 76111
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outpers extrapply not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 45/55 Rpt: 70/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/20/2024	Stephanie Klick Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$60,000.00	PO Box 7592
Expenditure from	
corporate funds	Fort Worth, TX 76111
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/01/2024	Steve Allison Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$15,000.00	200 Morningside Drive
\$15,000.00	200 Morningside Drive
Expenditure from	
corporate funds	San Antonio, TX 78209
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
2 1 2 2 1 1 2 1 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/13/2024	Steve Allison Campaign
	1.7
Amount (\$)	Payee address; City; State; Zip Code
\$25,000.00	200 Morningside Drive
Expenditure from	
corporate funds	San Antonio, TX 78209
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 46/55 Rpt: 71/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
01/26/2024	Strategic Media Placement Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$41,100.00	7669 Stagers Loop
Expenditure from corporate funds	Delaware, OH 43015
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	In Kind: Political Advertising
O Commission ONLY if dispose	Condidate/Office helds no years Office accords
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/02/2024	Strategic Media Placement Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$63,430.00	7669 Stagers Loop
Expenditure from corporate funds	Delaware, OH 43015
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In Kind: Political Advertising
	iii Kiiu. Foliticai Auvertisiiig
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/09/2024	Strategic Media Placement Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$40,000.00	7669 Stagers Loop
Expenditure from corporate funds	Delaware, OH 43015
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
	Check if Austin, TX, officeholder living expense
	In Kind: Political Advertising
Complete ONII V If all a	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 47/55 Rpt: 72/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/09/2024	Strategic Media Placement Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$66,000.00	7669 Stagers Loop
Expenditure from corporate funds	Delaware, OH 43015
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	In Kind: Political Advertising
• • • • • • • • • • • • • • • • • • • •	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/13/2024	Strategic Media Placement Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$87,795.00	7669 Stagers Loop
Expenditure from corporate funds	Delaware, OH 43015
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	In Kind: Political Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/15/2024	Strategic Media Placement Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$320,000.00	7669 Stagers Loop
Expenditure from	
corporate funds	Delaware, OH 43015
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In Kind: Political Advertising
	III Kina. Folitical Advertishing
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenolder/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 48/55 Rpt: 73/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/21/2024	Strategic Media Placement Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$34,180.00	7669 Stagers Loop
Expenditure from corporate funds	Delaware, OH 43015
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In Kind: Political Advertising
	III Kirid. F Olitical Advertising
O Committee ONII V if discret	Our distance (Office health are recorded)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u> </u>	
Date	Payee name
02/21/2024	Strategic Media Placement Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$175,000.00	7669 Stagers Loop
Expenditure from corporate funds	Delaware, OH 43015
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In Kind: Political Advertising
	III NIIU. FUIILCAI AUVEIUSIIIY
One of the ONE Vitalinest	Office county
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
- 1	
Date	Payee name
02/21/2024	Strategic Media Placement Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$49,376.00	7669 Stagers Loop
Expenditure from corporate funds	Delaware, OH 43015
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In Kind: Political Advertising
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
Sch: 49/55 Rpt: 74/86	Texans for Lawsuit Reform PAC 00028135						
4 Date	5 Payee name						
02/21/2024	Strategic Media Placement Inc.						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$137,000.00	7669 Stagers Loop						
Expenditure from corporate funds	Delaware, OH 43015						
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
	In Kind: Political Advertising						
	in rand. I ondod / devortioning						
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H						
Date	B						
02/23/2024	Payee name Strategic Media Placement Inc.						
	<u> </u>						
Amount (\$)	Payee address; City; State; Zip Code						
\$173,000.00	7669 Stagers Loop						
Expenditure from corporate funds	Delaware, OH 43015						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.						
	Check if Austin, TX, officeholder living expense						
	In Kind: Political Advertising						
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
01/30/2024	Strategic Media Services						
Amount (\$)	Payee address; City; State; Zip Code						
\$109,338.00	4601 N Fairfax Drive Suite 730						
·							
Expenditure from corporate funds	Arlington, VA 22203						
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
	In Kind: Political Advertising						
	The first of the f						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/O	• • • • • • • • • • • • • • • • • • •						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Candidate/Officeholder/Politica Credit Card Payment	cal Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not lis	ted above)					
orodic odra i dymoni	The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Con	nmission Filers)					
Sch: 50/55 Rpt: 75/86	Texans for Lawsuit Reform PAC 00028135						
4 Date	5 Payee name						
02/05/2024	Strategic Media Services						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$128,060.00	4601 N Fairfax Drive Suite 730						
Expenditure from corporate funds	Arlington, VA 22203						
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule	Г.					
EXPENDITURE	Check if Austin, TX, officeholder living expense						
	In Kind: Political Advertising						
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OI	DH						
Date	Payee name						
02/13/2024	Strategic Media Services						
Amount (\$)	Payee address; City; State; Zip Code						
\$189,894.00	4601 N Fairfax Drive Suite 730						
Expenditure from corporate funds	Arlington, VA 22203						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Advertising Expense	Γ.					
EXPENDITORE	Check if Austin, TX, officeholder living expense						
	In Kind: Political Advertising						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
experientare to benefit 6/61							
Date	Payee name						
02/14/2024	Strategic Media Services						
Amount (\$)	Payee address; City; State; Zip Code						
\$81,675.00	4601 N Fairfax Drive Suite 730						
Expenditure from corporate funds	Arlington, VA 22203						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule	Г.					
EXPENDITURE	Check if Austin, TX, officeholder living expense						
	In Kind: Political Advertising						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OI	JH						
		l l					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Con Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)							
•	The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:								
Sch: 51/55 Rpt: 76/86	Texans for Lawsuit Reform PAC 00028135							
4 Date	5 Payee name							
02/20/2024	Strategic Media Services							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$236,154.00	4601 N Fairfax Drive Suite 730							
Expenditure from corporate funds	Arlington, VA 22203							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF	Advertising Expense							
EXPENDITURE	Check if Austin, TX, officeholder living expense							
	In Kind: Political Advertising							
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
expenditure to benefit C/O	1							
Date	Payee name							
02/23/2024	Strategic Media Services							
Amount (\$)	Payee address; City; State; Zip Code							
\$25,035.00	\$25,035.00 4601 N Fairfax Drive Suite 730							
Expenditure from corporate funds	Arlington, VA 22203							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Advertising Expense							
EXI ENDITORE	Check if Austin, TX, officeholder living expense							
	In Kind: Political Advertising							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
- p								
Date	Payee name							
02/13/2024	Terry Wilson Campaign							
Amount (\$)	Payee address; City; State; Zip Code							
\$75,000.00	660 Parkline Drive							
Evnanditura fra								
Expenditure from corporate funds	Georgetown, TX 78626							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.							
LAFLINDITUKE	Candidate/Officeholder/Political Committee							
	Campaign Contribution							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
experience to belieff C/O	•							

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenolder/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 52/55 Rpt: 77/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/08/2024	Texans for Lawsuit Reform
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,000.00	1233 West Loop S Suite 1375
Expenditure from corporate funds	Houston, TX 77027
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	PAC Administrative Expense
	1710 / Millimotrative Expense
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/16/2024	The Gober Group PLLC
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 341016
Expenditure from corporate funds	Austin, TX 78734
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	PAC Legal Service
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	<u></u>
Date	Payee name
02/02/2024	The Lucio III Group PLLC
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	102 Orchard Rd
Expenditure from corporate funds	Olmito, TX 78575
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Legal Services Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	PAC Legal Service
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee 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)

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 53/55 Rpt: 78/86	Texans for Lawsuit Reform PAC	00028135
4 Date	5 Payee name	
02/08/2024	Tipps, Mary	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$1,500.00	1233 West Loop S Suite 1375	
Expenditure from corporate funds	Houston, TX 77027	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		PAC Staff Salaries
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Lught Office held
expenditure to benefit C/OI		onice neid
D-1-		
Date	Payee name	
02/08/2024	Trabulsi Jr., Richard	
Amount (\$)	Payee address; City; State; Zip C	ode
\$3,000.00	1233 West Loop S Suite 1375	
Expenditure from		
corporate funds	Houston, TX 77027	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense PAC Staff Salaries
		1 Ac stail salaries
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office so	Lught Office held
expenditure to benefit C/OI		agrit Office field
<u> </u>		
Date	Payee name	
02/15/2024	USPS	
Amount (\$)	Payee address; City; State; Zip C	ode
\$4,758.45	3201 Bee Cave Rd Ste 120	
Expenditure from		
corporate funds	Austin, TX 78746	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		In Kind: Direct Mail Postage
Complete ONII V If all a	Condidate/Officeholder reces	l company to the comp
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught Office held
,		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 54/55 Rpt: 79/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/20/2024	USPS
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$4,171.86	3201 Bee Cave Rd Ste 120
Expenditure from corporate funds	Austin, TX 78746
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	In Kind: Direct Mail Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/21/2024	USPS
Amount (\$)	Payee address; City; State; Zip Code
\$4,758.45	3201 Bee Cave Rd Ste 120
Expenditure from corporate funds	Austin, TX 78746
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	In Kind: Direct Mail Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Oi	
Date	Payee name
01/29/2024	Venton Jones Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	707 Vermont Ave
Ψ1,000.00	TOT VOIMORE/WO
Expenditure from	Delles TV 75216
corporate funds	Dallas, TX 75216
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee Campaign Contribution
	Campaign Contribution
Complete CNII V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	y
,	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outer a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 55/55 Rpt: 80/86	Texans for Lawsuit Reform PAC 00028135
4 Date	5 Payee name
02/02/2024	Verraton Media LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$10,000.00	2968 Mill Run Bend
Expenditure from corporate funds	Round Rock, TX 78665
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In Kind: Political Advertising
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/02/2024	Vince Perez Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$25,000.00	649 Londonderry Road
Expenditure from corporate funds	El Paso, TX 79907
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Campaigh Contribution
Commission ONLL V if disease	Condidate/Office helder name Office accepts
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instru	uction Guide explains how to complete this form.	1 Total pages Schedule F3: Sch: 1/2 Rpt: 81/86			
FILER NAME		3 Filer ID (Ethics Commission Filers)			
Texans for Lawsui	t Reform PAC	00028135			
Date	5 Name of person from whom investment is purchased	00020200			
02/16/2024	Wells Fargo				
	6 Address of person from whom investment is purchased; City				
	1000 Louisiana St 7th Fl				
	Houston TV 77000				
	Houston, TX 77002 7 Description of investment				
	Purchase of Federal Home Loan Bank Bond				
	8 Amount of investment (\$)				
	291,289.00				
Date	Name of person from whom investment is purchased				
02/16/2024	Wells Fargo				
	Address of person from whom investment is purchased; City				
	1000 Louisiana St 7th Fl				
	Houston, TX 77002				
	Description of investment				
Amount of investment (\$)					
250,148.67					
Date	Name of person from whom investment is purchased				
02/06/2024 Wells Fargo					
	Address of person from whom investment is purchased; City	; State; Zip Code			
	1000 Louisiana St 7th Fl				
	Houston, TX 77002				
	Description of investment				
	Purchase of Ameris Bank CD				
	Amount of investment (\$)				
	14,026.41				
Date	Name of person from whom investment is purchased				
02/06/2024	Wells Fargo				
	Address of person from whom investment is purchased; City				
	1000 Louisiana St 7th Fl				
	Houston, TX 77002				
	Description of investment				
	Purchase of First National Bank of Omaha CD				
	Amount of investment (\$)				
	14,439.66				

PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instruc	ction Guide explains how to complete this form.	1 Total pages Schedule F3: Sch: 2/2 Rpt: 82/86			
2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
Texans for Lawsuit F	00028135				
4 Date 02/02/2024 5 Name of person from whom investment is purchased Wells Fargo 6 Address of person from whom investment is purchased; City; State; Zip Code 1000 Louisiana St 7th Fl Houston, TX 77002 7 Description of investment Purchase of American Commercial Bank and Trust CD					
8 Amount of investment (\$) 245,465.02					
Date 02/02/2024 Name of person from whom investment is purchased Wells Fargo Address of person from whom investment is purchased; City; State; Z 1000 Louisiana St 7th Fl Houston, TX 77002 Description of investment Purchase of American Fairfield County Bank CD Amount of investment (\$) 247,177.77		y; State; Zip Code			
Date 02/02/2024	Name of person from whom investment is purchased Wells Fargo Address of person from whom investment is purchased; City 1000 Louisiana St 7th Fl Houston, TX 77002 Description of investment Purchase of American Republic Bank and Trust CD Amount of investment (\$) 245,000.00	y; State; Zip Code			

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains now to complete this form.			ages Schedule K: /4 Rpt: 83/86		
2	2 FILER NAME 3 Filer ID			(Ethics Commission Filers)	
	Texans for Lawsuit Reform PAC 00028			135	
4	Date 5 Name of person from whom amount is received				8 Amount (\$)
-	01/31/2024	Amarillo National Bank			\$4,517.69
	01/01/2021				ψ 1,011100
		6 Address of person from whom amount is received; City; State; Zip Code			
		Amarillo, TX 79105			
			c if polition	cal contr	ribution returned to filer
		Interest income			
	Date	Name of person from whom amount is received			Amount (\$)
	01/31/2024	Amegy Bank of Texas			\$79,084.30
		Address of person from whom amount is received; City; State; Zip Code			
		Houston, TX 77227			
		Purpose for which amount is received Check	c if politic	cal contr	ribution returned to filer
		Interest income			
	Date	Name of person from whom amount is received			Amount (\$)
	01/31/2024	Goldman Sachs			\$36,280.25
		Address of person from whom amount is received; City; State; Zip Code			
		01: 11.00000 4070			
		Chicago, IL 60606-4673			
		_	c if polition	cal contr	ribution returned to filer
		Interest Income			
	Date	Name of person from whom amount is received			Amount (\$)
	01/29/2024	Wells Fargo Advisors			\$9,737.50
		Address of person from whom amount is received; City; State; Zip Code			
		Houston, TX 77002			
			c if politic	cal contr	ibution returned to filer
		Interest income	t ii poiitit	oar ooria	ibation retained to mer
_					
	Date	Name of person from whom amount is received			Amount (\$)
	01/29/2024	Wells Fargo Advisors			\$3,478.36
		Address of person from whom amount is received; City; State; Zip Code			
		Houston, TX 77002			
		Purpose for which amount is received	c if polition	cal contr	ribution returned to filer
		Interest income			

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instruction Guide explains how to complete this form.			ages Schedule K: /4 Rpt: 84/86	
2	2 FILER NAME 3 Filer ID		(Ethics Commission Filers)		
	Texans for Lawsuit Reform PAC 00028			135	
4	Date 5 Name of person from whom amount is received				8 Amount (\$)
	01/31/2024	Wells Fargo Advisors			\$259.76
		6 Address of person from whom amount is received; City; State; Zip Code			
		Address of person from whom amount is received, City, State, 2:p code			
		Houston, TX 77002			
			if politic	ral contr	l ibution returned to filer
		Interest income	i pontic	ai conti	ibation retained to mer
	Date	Name of person from whom amount is received			Amount (\$)
	02/23/2024	Wells Fargo Advisors			\$1,019.60
		Address of person from whom amount is received; City; State; Zip Code			
		Houston, TX 77002			
			if polition	cal contr	ibution returned to filer
		Interest income			
	Date	Name of person from whom amount is received			Amount (\$)
	02/23/2024	Wells Fargo Advisors			\$998.79
		Address of person from whom amount is received; City; State; Zip Code			
		Houston, TX 77002			
		Purpose for which amount is received	if polition	cal contr	ibution returned to filer
		Interest income			
	Date	Name of person from whom amount is received			Amount (\$)
	02/22/2024	Wells Fargo Advisors			\$9,346.19
		Address of person from whom amount is received; City; State; Zip Code			
		Houston, TX 77002			
		Purpose for which amount is received	if polition	cal contr	ibution returned to filer
		Interest income			
_	Date	Name of person from whom amount is received			Amount (\$)
	02/13/2024	Wells Fargo Advisors			\$6,687.50
		Address of person from whom amount is received; City; State; Zip Code			. ,
		Address of person from whom amount is received, Gity, State, Zip Code			
		Houston, TX 77002			
		_	if polition	cal contr	ibution returned to filer
		Interest income	,		
		<u> </u>			

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		pages Schedule K: 3/4 Rpt: 85/86
2	FILER NAME		3	Filer	D (Ethics Commission Filers)
	Texans for L	awsuit Reform PAC		0002	8135
4	Date	5 Name of person from whom amount is received			8 Amount (\$)
	02/12/2024	Wells Fargo Advisors			\$289.62
	OL/1L/LOL-				
		6 Address of person from whom amount is received; City; State; Zip Code			
		Houston, TX 77002			
		-	politi	cal cor	tribution returned to filer
		Interest income			
	Date	Name of person from whom amount is received			Amount (\$)
	02/02/2024	Wells Fargo Advisors			\$1,076.00
		Address of person from whom amount is received; City; State; Zip Code	•••••		···
		Houston, TX 77002			
		_	noliti	cal cor	tribution returned to filer
		Interest income	ponti	oui ooi	inibation retarried to mer
	_				T
	Date	Name of person from whom amount is received			Amount (\$)
	02/01/2024	Wells Fargo Advisors			\$7,812.57
		Address of person from whom amount is received; City; State; Zip Code			
		Houston, TX 77002			
			politi	cal cor	tribution returned to filer
		Dividend income			
	Date	Name of person from whom amount is received			Amount (\$)
	02/22/2024	Wells Fargo Advisors			\$240,000.00
		Address of person from whom amount is received; City; State; Zip Code			··
		, aan ood of porosit from amount to room only , outlet, in process			
		Houston, TX 77002			
			noliti	cal cor	tribution returned to filer
		Redemption of Renasant Bank CD	ponti	oui ooi	inibation retarried to mer
\vdash		· · · · · · · · · · · · · · · · · · ·			
	Date	Name of person from whom amount is received			Amount (\$)
	02/13/2024	Wells Fargo Advisors			\$535,000.00
		Address of person from whom amount is received; City; State; Zip Code			
		Houston, TX 77002			
		-	politi	cal cor	tribution returned to filer
		Redemption of Federal Home Loan Bank Bond			

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 4/4 Rpt: 86/86 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Texans for Lawsuit Reform PAC 00028135 5 Name of person from whom amount is received 8 Amount (\$) Date 02/02/2024 \$246,000.00 Wells Fargo Advisors 6 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77002 Purpose for which amount is received Check if political contribution returned to filer Redemption of Cumberland Federal Bank CD