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) 00065835 3 COMMITTEE NAME **OFFICE USE ONLY** Grassroots America - We the People PAC Date Received **ELECTRONICALLY FILED** 02/26/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 130012 Date Hand-delivered or Date Postmarked Change of Address Tyler, TX 75713 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Jimmie F. NAME NICKNAME LAST **SUFFIX** Taylor STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 275 VZ CR 4906 STREET **ADDRESS** (Residence or Business) Ben Wheeler, TX 75754 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 328 S. Broadway MAILING **ADDRESS** Tyler, TX 75702 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (903) 530-6040 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

12 COMMITTEE NAME			13 File	er ID (Ethics C	Commission Filers)
Grassroots America - V	We the People PAC		000	65835	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Dale Huls State Re	epresentative		
(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.)				
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHE DR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	ER THAN	\$	4,813.35
	2. TOTAL POLITICA (OTHER THAN PLE	\$	8,323.24		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	\$	0.00		
	4. TOTAL POLITICA	L EXPENDITURES		\$	31,611.43
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	ONTRIBUTIONS MAINTAINED AS OF PERIOD	THE LAST DAY	\$	114,444.44
OUTSTANDING LOAN TOTALS		MOUNT OF ALL OUTSTANDING LOA REPORTING PERIOD	ANS AS OF THE	\$	0.00
6 AFFIDAVIT	<u> </u>				
		I swear, or affirm, under p true and correct and inclu under Title 15, Election C	udes all information		
			Mr. Jimmie F. Ta	avlor	
		Sign	nature of Campaign		
AFFIX NOTAR	Y STAMP / SEAL ABOVE	Š	, 0		
Sworn to and subscribe	d before me, by the said		, this the		day
of	, 20, to certify \	hich, witness my hand and seal of office	ce.		
Signature of officer a	dministering oath	Printed name of officer administering or	ath Title	e of officer adminis	stering oath

FORM GPAC ADDENDUM

Page 3 of 44

				1	
COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Grassroots America - W	e the People PAC			00065835	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Brent Money State Representat	ive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Jeff Fletcher State Representati	ve	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Daniel Alders State Representa	tive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 4 of 44

12 COMMITTEE NAME	to the Bready BAG			13 Filer ID	(Ethics Commission Filers)
Grassroots America - W	/e the People PAC			00065835	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jaye Curtis State Representativ	e	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	1. Candidates	A Supported	Paulette Carson State Represer	ntativo	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		Tautette Carson State (Vepreser	nauve	
(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.)		Brian Harrison State Representa	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 5 of 44

12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Grassroots America - W	e the People PAC			00065835	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Steve Toth State Representative	e	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Tom Glass State Representative	e	
	(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.)		Kyle Biederman State Represer	ntative	
	(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.)				

FORM GPAC ADDENDUM

Page 6 of 44

COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Grassroots America - W	e the People PAC			00065835	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Janine Chapa State Representa	tive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	1. Candidates	A. Supported	David Covey State Representati	ive	
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			
	Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Matthew Morgan State Represe	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
		•			

FORM GPAC ADDENDUM

Page 7 of 44

						rage / 0144
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Grassroots America - W	-				00065835	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Edgar Pacheco	Jr. State Repre	sentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		AJ Louderback	State Represen	itative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Dennis London	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				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	•					

FORM GPAC ADDENDUM

Page 8 of 44

12	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
	Grassroots America - W	e the People PAC			00065835
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Wesley Virdell State Representa	ative
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
			B. Opposed		
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Devvie Duke State Representati	ive
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
			B. Opposed		
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mike Olcott State Representative	е
	(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 9 of 44

COMMITTEE NAME Grassroots America - W COMMITTEE NCTIVITY Attach lists on plain naper to complete this eport if necessary.)	Candidates (Identify by name or, if applicable, classify by party.) Measures		Chuck Branch State Representa	13 Filer ID 00065835 ative	(Ethics Commission Filers)
COMMITTEE ACTIVITY Attach lists on plain laper to complete this	Candidates (Identify by name or, if applicable, classify by party.) Measures		Chuck Branch State Representa		
COMMITTEE ACTIVITY Attach lists on plain laper to complete this	Candidates (Identify by name or, if applicable, classify by party.) Measures		Chuck Branch State Representa		
aper to complete this		B. Opposed			
	(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	Keresa Richardson State Repre	sentative	
CTIVITY	(Identify by name or, if applicable, classify by party.)		Ψ.		
Attach lists on plain aper 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	A. Supported	Shelley Luther State Representa	ative	
Attach lists on plain aper 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 CCTIVITY Attach lists on plain aper to complete this	Assisted (Identify by name or, if applicable, classify by party.) 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 (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 eport if necessary.) 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 (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted (Identify by name or, if or applicable, classify by party.)	Assisted (Identify by name or, if applicable, classify by party.) Attach lists on plain aper to complete this eport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 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. Candidates (Identify by name or, if applicable, classify by party.) COMMITTEE CTIVITY Attach lists on plain aper to complete this eport if necessary.) 2. Measures (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	Assisted (identify by name or, if applicable, classify by party.) DOMMITTEE CTIVITY Attach lists on plain apper to complete this 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.) 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 5. Candidates (identify by name or, if applicable, classify by party.) B. Opposed 6. Supported Shelley Luther State Represent. Committee CTIVITY Attach lists on plain apper to complete this applicable, classify by party.) B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed	Assisted ((dentify by name or, if applicable, classify by party.) Attach lists on plain apper to complete this apport if necessary.) 2. Measures ((Describe by date and nature of issue.) 3. Officeholders Assisted ((dentify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted ((dentify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted ((dentify by name or, if applicable, classify by party.) A. Supported B. Opposed 3. Officeholders Assisted ((dentify by name or, if applicable, classify by party.) A. Supported B. Opposed 3. Opposed 3. Opposed 4. Supported B. Opposed 5. Opposed 6. Opposed 6. Opposed 6. Opposed 7. A. Supported 8. Opposed 8. Opposed 9. Opposed

FORM GPAC ADDENDUM

Page 10 of 44

						-
COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Grassroots America - W	e the People PAC				00065835	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Vince Gallo S	State Representativ	re	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Andy Hopper	State Representa	tive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mitch Little St	tate Representative	9	
(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 11 of 44

				1	
COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Grassroots America - W	e the People PAC			00065835	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Wayne Richard State Represen	tative	
(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.)		Daren Mels State Representativ	re	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Kerri Kingsbery State Represen	tative	
(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 12 01 44
COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Grassroots America - W	e the People PAC				00065835	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Donald Tru	mp President		
(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.)	A. Supported	Ted Cruz \	J.S. Senate		
(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	Cliff Wiley	U.S. House		
(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 13 of 44
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Grassroots America -	We the People PAC			000658	335
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Clint Dorris U.S. Hou	se	
(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.)		Julie Clark U.S. Hous	se	
(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.)		Brandon Gill U.S. Ho	use	
(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 14 of 44

						1 490 1 1 01 1 1
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Grassroots America - W	e the People PAC			00065835	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Nathaniel Moran U.S. House		
	(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	1. Candidates	A. Supported	John Devine Supreme Court Ju	stice	
	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	Clint Morgan Court Of Appeals	, Justice	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 15 of 44

COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Grassroots America - W	e the People PAC			00065835
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		David Schenck Court of Crimina	l Appeals, Presiding Judge
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Gina Parker Court Of Criminal A	ppeals, Judge
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Christi Craddick Railroad Comm	issioner
(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 (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	Grassroots America - We the People 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.) COMMITTEE ACTIVITY 1. Candidates (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.) 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.) 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 (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted 3. Officeholders Assisted 3. Officeholders Assisted 3. Officeholders Assisted	Grassroots America - We the People 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 (Attach lists on plain paper to complete this report if necessary.) COMMITTEE (Attach lists on plain paper to complete this report if necessary.) COMMITTEE (Attach lists on plain paper to complete this report if necessary.) COMMITTEE (Attach lists on plain paper to complete this report if necessary.) COMMITTEE (Attach lists on plain paper to complete this report if necessary.) COMMITTEE (Attach lists on plain paper to complete this report if necessary.) COMMITTEE (Attach lists on plain paper to complete this report if necessary.) A. Supported (Identify by name or, if applicable, classify by party.) COMMITTEE (Attach lists on plain paper to complete this report if necessary.) A. Supported (Identify by name or, if applicable, classify by party.) COMMITTEE (Attach lists on plain paper to complete this report if necessary.) A. Supported (Identify by name or, if applicable, classify by party.) B. Opposed COMMITTEE (Attach lists on plain paper to complete this report if necessary.) B. Opposed COMMITTEE (Attach lists on plain paper to complete this report if necessary.) B. Opposed	Grassroots America - We the People 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 (Describe by date and location of election and nature of issue.) A. Supported Gina Parker Court Of Criminal A Supported location of election and nature of sue.) B. Opposed COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE (Describe by date and location of election and nature of sue.) B. Opposed 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.) A. Supported Christi Craddick Railroad Comm distribution of election and nature of focus on and nature of

FORM GPAC ADDENDUM

Page 16 of 44

	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Grassroots America - W	e the People PAC			00065835	
14	COMMITTEE	1. Candidates	A. Supported	Jace Yarbrough State Senator		
	ACTIVITY	(Identify by name or, if		S		
		applicable, classify by party.)				
	(Attach lists on plain		B. Opposed			
	paper to complete this		В. Оррозси			
	report if necessary.)					
		0. 14	A C			
		Measures (Describe by date and	A. Supported			
		location of election and				
		nature of issue.)	D. Ourrand			
			B. Opposed			
		Officeholders Assisted				
		(Identify by name or, if				
		applicable, classify by party.)				
	COMMITTEE	1. Candidates	A. Supported	Liz Casey State Representative		
	ACTIVITY	(Identify by name or, if applicable, classify by party.)				
		applicable, classify by partyly				
	(Attach lists on plain		B. Opposed			
	paper to complete this report if necessary.)					
	,,,,,					
		2. Measures	A. Supported			
		(Describe by date and location of election and				
		nature of issue.)				
			B. Opposed			
		3. Officeholders				
		Assisted				
		(Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	A. Supported	Tim Greeson State Representat	tive	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Tim Grocom Glato Roprosonia		
		applicable, classify by party.)				
	(Attach lists on plain		B. Opposed			
	paper to complete this					
	report if necessary.)					
		2. Measures	A. Supported			
		(Describe by date and				
		location of election and nature of issue.)				
			B. Opposed			
			1,1,2,2,2,3			
		3. Officeholders				
		Assisted				
		(Identify by name or, if applicable, classify by party.)				
		applicable, classify by party.)	<u> </u>			

FORM GPAC ADDENDUM

Page 17 of 44

12	COMMITTEE NAME				13 Filer ID (E	thics Commission Filers)
	Grassroots America - W	e the People PAC			00065835	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jamie Haynes State Representa	ative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Abraham George State Represe	entative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		David Lowe State Representativ	/e	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 18 of 44

COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Grassroots America - W	e the People PAC				00065835	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jack Reynolds	State Represent	tative	
(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.)		Barry Wernick	State Represent	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Marc LaHood	State Representa	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	Assisted (Identify by name or, if					

FORM GPAC ADDENDUM

Page 19 of 44

				1	
COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Grassroots America - W	e the People PAC			00065835	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		John Perez State Representativ	e	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Dr. Mary Bone State Board Of E	Education	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Brandon Hall State Board Of Ed	lucation	
(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 20 of 44

						Fage 20 01 44
	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Grassroots America - W	e the People PAC			00065835	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jamie Kohlmann State Board O	f Education	
	(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	1. Candidates	A. Supported	Pam Little State Board Of Educa	ation	
	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				
	00111111111	applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Sara Maynard Smith County Co	ourt at Law	
	(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.)	<u> </u>			

FORM GPAC **ADDENDUM**

	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
(Grassroots America - W	e the People PAC			00065835	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Reeve Jackson District Judge	,	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Christina Drewry Smith County	Commissioner	
-	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.)		J Scott Herod Smith County Co	mmissioner	
-	(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.)	<u> </u>			

FORM GPAC ADDENDUM

Page 22 of 44

12 COMMITTEE NAM					13 Filer ID	(Ethics Commission Filers)
Grassroots Ame	erica - We the People PAC				00065835	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Terry Phillips	Smith County C	Commissioner	
(Attach lists on pla paper to complete report if necessary	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.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Josh Joplin	Smith County Co	nstable	
(Attach lists on pla paper to complete report if necessary	this	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.)		Darrell Hale	Collin County Co	ommissioner	
(Attach lists on pla paper to complete report if necessary	this	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.)				
	Assisted (Identify by name or, if)				

FORM GPAC **ADDENDUM**

					Page 23 01 44
COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Grassroots America - W	e the People PAC			00065835	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Joyce Yannuzzi Comal County	Commissioner	
(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.)		Tim Good District Attorney		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Cary Mellema Wise County She	eriff	
(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 24 of 44

					Fage 24 01 44
COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Grassroots America - W	e the People PAC			00065835	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		David Eishen Wood County Co	mmissioner	
(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	1. Candidates		Chip Krieger Van Zandt County	Sheriff	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		Chip kneger van Zandt County	Sherm	
(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			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Gwen Withrow County Party Ch	nair	
(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.)	1			

FORM GPAC ADDENDUM

Page 25 of 44

COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Grassroots America - W	e the People PAC			00065835
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Mike O'Donnell Bexar Cou	nty Republican Party Precinct Chair
(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.)		Vallerie Villareal County Pa	arty Chair
(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.)		Kim Laseter District Judge	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			

FORM GPAC **ADDENDUM**

						Page 26 01 44
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Grassroots America - W	e the People PAC			00065835	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Vince Giardino District Judge		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Nathan Buchanan Bexar Count	y Sheriff	
	(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			
	(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	Ballot ID:Prop 1 Election Date:2	024-03-05 Desc	c:Eliminate property taxes
			B. Opposed			
		Officeholders Assisted (Identify by name or, if				
		applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 27 of 44

				Fage 27 01 44
12 COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Grassroots America - W	e the People PAC			00065835
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(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	Ballot ID:Prop 2 Election Date:20 Protection Unit to seal the borde	
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(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	Ballot ID:Prop 3 Election Date:20	024-03-05 Desc:Require E-verify.
		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.)	A. Supported		
(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	Ballot ID:Prop 4 Election Date:20 public services for illegal aliens	024-03-05 Desc:End all subsidies and
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if			
	(Describe by date and location of election and nature of issue.) 3. Officeholders Assisted	B. Opposed		024-03-05 Desc:End

FORM GPAC ADDENDUM

Page 28 of 44

						Fage 20 01 44
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Grassroots America - W	e the People PAC			00065835	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
	(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	Ballot ID:Prop 5 Election Date:20 not to grant amnesty or a pathwa		
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
	(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	Ballot ID:Prop 6 Election Date:20 of the Texas Nation Guard to a fo war		
			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			
	(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	Ballot ID:Prop 7 Election Date:20 through the Texas Bullion Depos		
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if				
		(Identify by name or, if applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 29 of 44

People PAC Indidates by name or, if let, classify by party.) B. Opposed Pasures be by date and of election and if issue.) B. Opposed B. Opposed	Ballot ID:Prop 8 Election Date:2024-03-05 Desc:Freedom to give or withhold consent for any vaccine without coercion.
B. Opposed Passures be by date and of election and fissue.)	Ballot ID:Prop 8 Election Date:2024-03-05 Desc:Freedom to give or withhold consent for any vaccine without coercion.
by name or, if ole, classify by party.) B. Opposed easures be by date and of election and if issue.)	Ballot ID:Prop 8 Election Date:2024-03-05 Desc:Freedom to give or withhold consent for any vaccine without coercion.
easures A. Supporte be by date and of election and fissue.)	Ballot ID:Prop 8 Election Date:2024-03-05 Desc:Freedom to give or withhold consent for any vaccine without coercion.
ne by date and of election and of issue.)	withhold consent for any vaccine without coercion.
B. Opposed	1
ficeholders sisted by name or, if le, classify by party.)	
ndidates A. Supporte by name or, if lie, classify by party.)	ed
B. Opposed	I
easures be by date and of election and if issue.) A. Supporte	Ballot ID:Prop 9 Election Date:2024-03-05 Desc:Restrict voting in the Republican Primary to registered Republicans.
B. Opposed	I
ficeholders sisted by name or, if ole, classify by party.)	
hy name or, if ole, classify by party.)	ed
B. Opposed	1
easures be by date and of election and if issue.) A. Supporte	Ballot ID:Prop 10 Election Date:2024-03-05 Desc:Restore authority to the Texas Attorney General to prosecute election crimes.
B. Opposed	I
	by name or, if e. classify by party.) Indidates by name or, if e. classify by party.) B. Opposed B. Opposed A. Supporte by date and of election and issue.)

FORM GPAC ADDENDUM

Page 30 of 44

					rage 30 01 44
12 COMMITTEE NAME				13 Filer ID (Ethics C	Commission Filers)
Grassroots America - W	/e the People PAC			00065835	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(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	Ballot ID:Prop 11 Election Date:2 or private schools with funding for		to select public
		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.)	A. Supported			
(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	Ballot ID:Prop 12 Election Date:2 citizenship to register to vote.	2024-03-05 Desc:Requ	ire proof of
		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			
(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	Ballot ID:Prop 13 Election Date:2 citizens or entities from China, Ir		
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if				
	location of election and nature of issue.) 3. Officeholders Assisted		Citizens of entities from China, ii	an, North Rolea, and R	_

SUBTOTALS - GPAC

FORM GPAC **COVER SHEET PG 3**

					31 of 44					
l	17 COMMITTEE NAME 18 Filer ID (Ethics Commission Filers)									
Gra	assroot	s America - We the People PAC	00065835							
	ME OF	SUBTOT	AL AMOUNT							
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	8,323.24					
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00					
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00					
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	PR	\$						
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$						
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$						
7.		\$								
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$						
9.	X	SCHEDULE E: LOANS		\$	0.00					
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	31,611.43					
11.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00					
12.	X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00					
13.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00					
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$						
15.		\$								
				1						

	MONET	ARY POLITICAL (IS		SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 1/3 Rpt: 32/44	
2	FILER NAME Grassroots A	America - We the People PAC				3	Filer ID (Ethics Commission 00065835	n Filers)
4	Date 02/09/2024	5 Full name of contributor Arocha, Kathi6 Contributor address; City; S				7	Amount of Contribution (\$)	\$95.80
		Arlington, TX 76016						
8	Principal occu Substitute Te	pation / Job title (See Instructions eacher	s) 	9	Employer (See Instructions Arlington ISD	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 01/31/2024 Berkhouse, Richard Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$150.00		
	Principal occu	Whitehouse, TX 75791 pation / Job title (See Instructions	s)		Employer (See Instructions Retired	<u> </u> s)		
	Date 02/23/2024	Full name of contributor out-of-state PAC (ID#:)			Amount of Contribution (\$)	\$250.00		
	Deinsinal	Tyler, TX 75701			Franks on (Cook both stice			
	Retired	pation / Job title (See Instructions	b)		Employer (See Instructions Retired	»)		
	Date 01/27/2024	Full name of contributor Loeckle, Larry Contributor address; City; S Bullard, TX 75757	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$38.14
	Principal occu Retired	pation / Job title (See Instructions	5)		Employer (See Instructions Retired	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/03/2024 Loeckle, Larry Contributor address; City; State; Zip Code Bullard, TX 75757			•	Amount of Contribution (\$)	\$32.25		
	Principal occu Retired	pation / Job title (See Instructions	s)		Employer (See Instructions Retired	5)		

	MONET	ARY POLITICAL (CONTRIBUTIO	NS	5		SCHEDUI	LE A1
	The Instruc	ction Guide explains how	to complete this fo	rm	ı .	1	Total pages Schedule A1: Sch: 2/3 Rpt: 33/44	
2	FILER NAME Grassroots A	America - We the People PAC				3	Filer ID (Ethics Commission 00065835	on Filers)
4	Date 02/03/2024	5 Full name of contributor Loeckle, Larry6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	7	Amount of Contribution (\$)	\$32.25
0	Dringing aggu	Bullard, TX 75757	\	0 6	Employer (See Instructions			
8	Retired	pation / Job title (See Instructions) 9		Employer (See Instructions Retired	·)		
	Date Full name of contributor out-of-state PAC (ID#:) Loveall, Debbie Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$239.95		
	Principal occu	Nash, TX 75569 pation / Job title (See Instructions)	E	Employer (See Instructions	<u> </u>		
	Retired			F	Retired			
	Date Full name of contributor out-of-state PAC (ID#:) 02/14/2024 Marcus, Ann Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$239.95			
		Dallas, TX 75225						
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
	Date 02/08/2024	Full name of contributor Priefert, Bill Contributor address; City; St Mt. Pleasant, TX 75456	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$1,000.00
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Priefert Manufacturing)		
	Date 02/21/2024	Full name of contributor Priefert, Bill Contributor address; City; St Mt. Pleasant, TX 75456	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Priefert Manufacturing	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/3 Rpt: 34/44	
2	FILER NAME Grassroots	America - We the People PAC		3	Filer ID (Ethics Commission 00065835	on Filers)
4	Date 02/15/2024	5 Full name of contributor out-of-state PAC (ID#:_ Rivard, Kathi-Ann 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$95.80
8		Prosper, TX 75078 upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 01/31/2024	Full name of contributor out-of-state PAC (ID#:_Slaughter, Michael Contributor address; City; State; Zip Code McKinney, TX 75069	Retired		Amount of Contribution (\$)	\$239.95
	Principal occu Real Estate	upation / Job title (See Instructions)	Employer (See Instructions Self Employed	s)		
	Date 02/22/2024	Full name of contributor out-of-state PAC (ID#:_ Somma, John Contributor address; City; State; Zip Code Austin, TX 78750)		Amount of Contribution (\$)	\$95.80
	Principal occu Sr. Software	Ipation / Job title (See Instructions)	Employer (See Instructions Cornerstone Staffing So		ions	

PLEI	DGED CONTRIBU	TIONS				SCHEDULE B	
Т	he Instruction Guide ex	plains how to comp	plete this form.	1	Total pages Sche Sch: 1/1 Rpt: 3		
2 FILER N Grassro	AME ots America - We the People	PAC		3	Filer ID (Ethics Commission Filers) 00065835		
<u></u>	OF UNITEMIZED PLED			\$	0.00		
5 Date	6 Full name of pledgor	out-of-state PAC (I	D#:	8	Amount of pledge (\$)	9 In-kind description (If applicable)	
	7 Pledgor Address;	City; State; Zip Co	ode				
					Check if travel out	tside of Texas. Complete Schedule T.	
10 Principal	occupation / Job title (See Instru	uctions)	11 Employer (See In	structi	ons)		

	LOANS					SCHEDULE E
	The Instruction	on Guide explains how to con	nplete this f	orm.		al pages Schedule E: n: 1/1 Rpt: 36/44
2	FILER NAME Grassroots Ame	rica - We the People PAC				r ID (Ethics Commission Filers) 065835
4	TOTAL OF UN	IITEMIZED LOANS				\$ 0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code		10 Interest Rate
						11 Maturity Date
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Inst	ructions)	
14	Description of Coll	ateral		15 Check if personal for	unds were depo	sited into political account (See Instructions)
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
	not applicable	18 Guarantor address; City;	State;	Zip Code		
20	Principal occupation	on		21 Employer (See Inst	ructions)	

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	- Gift/Awa I Committee Legal So	everage Expense urds/Memorials Expense ervices struction Guide explains	-	nse es/Contract Labor	Travel in District Travel Out of Dis OTHER (enter a	
1 Total pages Schedule F1:	2 FILER NAME				3 Filer ID	(Ethics Commission Filers)
Sch: 1/8 Rpt: 37/44	Grassroots Ameri	ca - We the People F	PAC		00065835	
4 Date	5 Payee name				l	
02/05/2024	Cube Smart					
6 Amount (\$)	7 Payee address;	City; State	; Zip Code	<u> </u>		
\$2,628.00	5701 Old Bullard	•				
Expenditure from corporate funds	Tyler, TX 75703					
8 PURPOSE	(a) Category (See Categ	ories listed at the top of this sch	nedule) (b) Description		
OF EXPENDITURE	Office Overhead/			<u> </u>	outside of Texas. Com , TX, officeholder living	
				Annual storag		у ехрепье
9 Complete ONLY if direct	Condidate/Office!!-	or nome	Office accord	<u> </u>	Office !-	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officehold	er name C	Office sough	ι	Office he	eid
Date	Payee name					
02/13/2024	Federer, William					
Amount (\$)	Payee address;	City; State	; Zip Code		<u> </u>	
\$1,000.00	PO Box 60442					
Expenditure from corporate funds	Ft. Myers, FL 339	06				
PURPOSE	(a) Category (See Categ	ories listed at the top of this sch	nedule) (b) Description		
OF EXPENDITURE	Travel Reimburse	ement		<u> </u>	outside of Texas. Com , TX, officeholder living	
				2/13 speaker		, ortonia
				,		
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officehold	er name (Office sough	t	Office he	eld
Date	Payee name					
02/20/2024	Full Fusion LLC					
Amount (\$)	Payee address;	City; State	; Zip Code	1		
\$544.43	317 Sidney Baker	r				
Evponditure from	Ste 400-308					
Expenditure from corporate funds	Kerrville, TX 7802	28				
PURPOSE	(a) Category (See Categ	ories listed at the top of this sch	nedule) (b) Description		
OF EXPENDITURE	Website Services			ш	outside of Texas. Com	
				Website secu	, TX, officeholder living Irity uparade	j expense
					apgrado	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officehold	er name (Office sough	t	Office he	eld
Former manifel at the Transfer	11.					

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
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: 2/8 Rpt: 38/44	Grassroots America - We the People PAC 00065835
4 Date	5 Payee name
02/20/2024	Full Fusion LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$58.00	317 Sidney Baker
Expenditure from	Ste 400-308
corporate funds	Kerrville, TX 78028
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Website Services Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Transfer in two new domains
	Transfer in two new domains
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/08/2024	Global Mailing Service, Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$10,921.18	1015 NNE Loop 323
Expenditure from corporate funds	Tyler, TX 75708
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Mailing Services Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Processing & postage for primary election endorsement mailer
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/03/2024	Greater Texas Votes
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	PO Box 6629
Expenditure from	Houston, TX 77265
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Training Event
	Lone Star Civics Center fee
Complete ONLY if direct expenditure to benefit C/O	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 Commit 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		Legal Services			se s/Contract Labor		OTHER (enter a	a category not listed above)
Great Sara r ayment		The Instruction Guide ex	xplains how to co	mple	ete this form.			
1 Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
Sch: 3/8 Rpt: 39/44	Grassroots	America - We the Pe	ople PAC				00065835	
4 Date	5 Payee name							
02/02/2024	Holiday Inn	Conference Center						
6 Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode				
\$1,847.00	5701 South	Broadway						
Expenditure from corporate funds	Tyler, TX 75	5703						
8 PURPOSE	(a) Category (Se	ee Categories listed at the top o	of this schedule)	(b)	Description			
OF EXPENDITURE	Event Expe							plete Schedule T.
EXI ENDITORE					_	, TX,	officeholder living	g expense
					Facility fees Congressiona	al T	own Hall	
					Congressione	AI I	OWITTIAL	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ceholder name	Office sou	ıght			Office h	eld
Date	Payee name							
02/20/2024	Mail Chimp							
Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode				
\$173.07	mailchimp.c	com						
Expenditure from corporate funds	mailchimp.c	com, TX 75703						
PURPOSE	(a) Category (Se	ee Categories listed at the top o	of this schedule)	(b)	Description			
OF EXPENDITURE	Email Servi	ce			_			plete Schedule T.
EXI ENDITORE					ш		officeholder living	g expense
					Email service)		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ceholder name	Office sou	ıght			Office h	eld
experientare to belieff Gree								
Date	Payee name							
02/05/2024	McDonald L	aw Office						
Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode				
\$157.82	1308 Ranch	ners Legacy Trl						
Expenditure from corporate funds	Fort Worth,	TX 76126						
PURPOSE	(a) Category (s	ee Categories listed at the top o	of this schedule)	(b)	Description			
OF	Legal Servi		,			outsi	de of Texas. Com	plete Schedule T.
EXPENDITURE					_		officeholder living	
							marillo for P	rop 2 Election Contest
					Appeals Cou	ıı		
Complete ONLY if direct		ceholder name	Office sou	ıght			Office h	eld
expenditure to benefit C/OI	Н							

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

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: 4/8 Rpt: 40/44	Grassroots America - We the People PAC 00065835
4 Date	5 Payee name
02/01/2024	Rogers, Brett
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5,000.00	4514 Edinburgh Drive
Expenditure from	Tyler, TX 75703
corporate funds	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	February retainer
	Marketing & IT Development services
Complete ONLY if direct	Candidate/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
<u> </u>	
Date	Payee name
02/03/2024	Shulter, Robert
Amount (\$)	Payee address; City; State; Zip Code
\$3,000.00	100 Kings Fort Parkway 105-303
Expenditure from corporate funds	Kaufman, TX 75142
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	February consulting fee
	r conduity consuming lee
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
02/03/2024	Shulter, Robert
Amount (\$)	Payee address; City; State; Zip Code
\$548.73	100 Kings Fort Parkway 105-303
Expenditure from corporate funds	Kaufman, TX 75142
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Chock if travel outside of Toyas, Complete Schedule T
EXPENDITURE	Travel Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Mileage Weatherford & Dallas trips
	militage Weatherford a Ballas trips
Complete <u>ONLY</u> 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 - 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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Total marca Cabadula F1.	2 Files ID (Ethics Commission Files)
1 Total pages Schedule F1: Sch: 5/8 Rpt: 41/44	2 FILER NAME Grassroots America - We the People PAC 3 Filer ID (Ethics Commission Filers) 00065835
4 Date	5 Payee name
02/03/2024	Shulter, Robert
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$22.20	100 Kings Fort Parkway 105-303
	, ,
Expenditure from corporate funds	Kaufman, TX 75142
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Travel Reimbursement Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	NTTA tolls
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/03/2024	Shulter, Robert
Amount (¢)	·
Amount (\$)	
\$12.08	100 Kings Fort Parkway 105-303
Expenditure from	
corporate funds	Kaufman, TX 75142
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
	Facebook ads
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	
Date	Payee name
02/03/2024	Shulter, Robert
Amount (\$)	Payee address; City; State; Zip Code
\$69.99	100 Kings Fort Parkway 105-303
Even a ditura fra ::	
Expenditure from corporate funds	Kaufman, TX 75142
PURPOSE	
OF	
EXPENDITURE	Subscription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Raindroppers Text Alerts
Commission CAULY if allowing	Condidate/Officeholder page Office page 1
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
SAPORIGICATO TO DOTTOTIC O/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 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: 6/8 Rpt: 42/44 Grassroots America - We the People PAC 00065835 4 Date Payee name 02/03/2024 Shulter, Robert 6 Amount (\$) Payee address; City; State; Zip Code \$108.10 100 Kings Fort Parkway 105-303 Expenditure from Kaufman, TX 75142 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. Travel Reimbursement **EXPENDITURE** Check if Austin, TX, officeholder living expense Hotel Holiday Inn Tyler Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/03/2024 Shulter, Robert Amount (\$) Payee address; City; State; Zip Code \$167.90 100 Kings Fort Parkway 105-303 Expenditure from Kaufman, TX 75142 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. Subscription **EXPENDITURE** Check if Austin, TX, officeholder living expense Zoom annual subscription Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/06/2024 Taylor CPA, Jimmie (Mr.) Amount (\$) Payee address: City: State; Zip Code \$300.00 275 VZ County Road 4906 Expenditure from corporate funds Ben Wheeler, TX 75754 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense TEC report due 2/5/24 Complete ONLY if direct Candidate/Officeholder name Office sought Office held 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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total marca Calcadula F1.	
1 Total pages Schedule F1:	
Sch: 7/8 Rpt: 43/44	Grassroots America - We the People PAC 00065835
4 Date	5 Payee name
02/03/2024	Trainor, Lucy
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$200.00	1029 Hawthorne Loop
φ200.00	1029 Hawthome Loop
Expenditure from	
corporate funds	Driftwood, TX 78619
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Travel Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Poll Watcher & Election Worker training
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
5 .	
Date	Payee name
02/08/2024	Xpresso Print Cafe
Amount (\$)	Payee address; City; State; Zip Code
\$143.75	111 University Place
Expenditure from	Tyler, TX 75702
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	2/3/24 Poll Watcher & Election training handouts
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to beliefit C/Or	
Date	Payee name
02/08/2024	Xpresso Print Cafe
	·
Amount (\$)	Payee address; City; State; Zip Code
\$2,481.43	111 University Place
Expenditure from	
corporate funds	Tyler, TX 75702
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Printing Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Primary Endorsement mailer
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 Comm

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

Candidate/Officenoider/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: 8/8 Rpt: 44/44	Grassroots America - We the People PAC 00065835
4 Date	5 Payee name
02/16/2024	Xpresso Print Cafe
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$123.75	111 University Place
Expenditure from corporate funds	Tyler, TX 75702
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	2/13 & 2/18 Meeting handouts
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/16/2024	Xpresso Print Cafe
Amount (\$)	Payee address; City; State; Zip Code
\$104.00	111 University Place
Expenditure from corporate funds	Tyler, TX 75702
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Harris County speaking event
	That is country opening event
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	