GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

Th	The GPAC Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 00085127					2 Total pages filed: 21	
3	COMMITTEE NAME					OFFICE USE ONLY	
	Texans For Respo	nsible Government PAC				Date Received	
						ELECTRONICALLY FILED 02/26/2024	
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CI	Y;	STATE; ZIP (CODE		
	ADDRE35	919 Congress Suite 1255				Date Hand-delivered or Date Postmarked	
	Change of Address						
	L °	Austin, TX 78701				Receipt # Amount	
						Date Processed	
						Date Imaged	
5	CAMPAIGN	MS / MRS / MR FIRST				MI	
	TREASURER NAME	Mr. Jon C.					
		NICKNAME LAST				SUFFIX	
		Chris Britton					
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE; ZIP CODE	
	TREASURER STREET	919 Congress Suite 1255					
	ADDRESS						
	(Residence or Business)	Austin, TX 78701					
7	CAMPAIGN	STREET OR PO BOX;		APT / SUITE #;	CITY;	STATE; ZIP CODE	
	TREASURER MAILING	919 Congress Suite 1255					
	ADDRESS						
	Change of Address	Austin, TX 78701					
_							
ð	CAMPAIGN TREASURER	AREA CODE PHONE NUMBER (512) 480-0006	EXI	ENSION			
	PHONE	(512) 480-0000					
9	REPORT	January 15	اء مالد				
	TYPE			ay before election		Dissolution (Attach PAC-DR)	
			h da	y before election		10th day after campaign treasurer termination	
		July 15	unof	ł			
10	PERIOD	Month Day Year		Month	Day	Year	
10	COVERED	-	HRC		/24/2024		
				02			
11	ELECTION	ELECTION DATE		ELECTION -	ΓΥΡΕ		
			Prima	ary Runoff		Other	
		03/05/2024	Gene	ral Special			
-		II					
	GO TO PAGE 2						
For	ms provided by Te	xas Ethics Commission www.e	thic	s.state.tx.us		Version V3.5.1.9000c471	

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME	12 COMMITTEE NAME 13 Fil				
Texans For Responsible	00085127	7			
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	esentative			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00	
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	210,000.00	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00	
	4. TOTAL POLITICA	L EXPENDITURES	\$	516,863.32	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	518,155.76	
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 REPORTING PERIOD	THE \$	0.00	
16 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.					
		Mr. Jon	C. Britton		
		Signature of Car	mpaign Treas	urer	
AFFIX NOTARY	AFFIX NOTARY STAMP / SEAL ABOVE				
		, tł	nis the	day	
of	, 20, to certify v	which, witness my hand and seal of office.			
Signature of officer ad	ninistering oath	Printed name of officer administering oath	Title of off	icer administering oath	
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V3.5.1.9000c47f	

FORM GPAC

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texans For Responsible	e Government PAC				00085127	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Candy Noble	State Representati	ive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Cole Hefner S	tate Representativ	/e	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Dade Phelan	State Representati	ive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
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FORM GPAC

Page 4 of 21

12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)	
Texans For Responsible	e Government PAC					00085127	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supp	oorted	David Spiller St	ate Representati	ve	
(Attach lists on plain paper to complete this report if necessary.)		В. Орро	osed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supp	oorted				
		В. Орро	osed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		oorted	Dustin Burrows	State Represent	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppo	osed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supp	oorted				
		В. Орро	osed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supp	oorted	Ellen Troxclair	State Representa	ative	
(Attach lists on plain paper to complete this report if necessary.)		В. Орро	osed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supp	oorted				
		В. Орро	osed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
		I					

FORM GPAC

Page 5 of 21

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)	
Texans For Responsible	e Government PAC			00085127	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Greg Bonnen State Representa	tive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jacey Jetton State Representat	ive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jill Dutton 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.)				
		I			

FORM GPAC

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texans For Responsible	e Government PAC			00085127	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	JR Rameriz State Representativ	re	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Kronda Thimesch State Represe	entative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Lynn Stucky State Representati	ve	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	thiss Commission				

FORM GPAC ADDENDUM

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12 COMMITTEE NAME	13 Filer ID	(Ethics Commission Filers)			
Texans For Responsible	e Government PAC			00085127	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mano DeAyala State Representa	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Pat Curry 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.)	A. Supported	Stan Gerdes State Representati	ve	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
Forms provided by Tayas F	thics Commission		vethics state ty us		Version V3 5 1 9000c/7

FORM GPAC

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texans For Responsible	e Government PAC			00085127	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Stan Kitzman State Represental	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	1. Candidates	A. Supported	Stonhonia Klick State Donreger	tativo	
ACTIVITY	(Identify by name or, if applicable, classify by party.)	A. Supported	Stephanie Klick 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	1. Candidates	A. Supported	Trent Ashby State Representativ	18	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		Trent Ashby State Representation		
(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.)				
	thiss Commission				

FORM GPAC COVER SHEET PG 3

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	17 COMMITTEE NAME 18 Filer ID					
	or Responsible Government PAC	00085127	1			
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT			
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 210,000.00			
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$			
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABC ORGANIZATION)R	\$			
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	ATION OR	\$			
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$			
7.	7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION					
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$			
9.	SCHEDULE E: LOANS		\$			
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 516,863.32			
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$			
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$			
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$			
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$			

SUBTOTALS - GPAC

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 **1** Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 10/21 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Texans For Responsible Government PAC 00085127 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 02/13/2024 \$210,000.00 Michael Porter Family Trust 6 Contributor address; City; State; Zip Code Doss, TX 78618 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting 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: 1/11 Rpt: 11/21	Texans For Responsible Government PAC00085127					
4 Date 01/29/2024	5 Payee name					
01/29/2024	Angie Chen Button Campaign					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$5,000.00	6914 Clear Springs Cir					
corporate funds	Garland, TX 75044					
8 PURPOSE OF EXPENDITURE	 (b) Description 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 					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
02/12/2024	Candy Noble Campaign					
Amount (\$)	Payee address; City; State; Zip Code					
\$10,000.00	1105 E. Main Street #22					
Expenditure from corporate funds	Allen, TX 75002					
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 					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
02/21/2024	Candy Noble Campaign					
Amount (\$)	Payee address; City; State; Zip Code					
\$25,000.00	1105 E. Main Street #22					
Expenditure from corporate funds	Allen, TX 75002					
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 					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Over Food/Beverage Expense Polling Exp y - Gift/Awards/Memorials Expense Printing Exp	ense Travel Out of District ges/Contract Labor OTHER (enter a category not listed above)					
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
Sch: 2/11 Rpt: 12/21	Texans For Responsible Government PAC	00085127					
4 Date	5 Payee name						
02/05/2024	Chase Bank						
6 Amount (\$)	7 Payee address; City; State; Zip Cod	e					
\$2.50	270 PARK AVE						
Expenditure from corporate funds							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Image: Check if Austin, TX, officeholder living expense Bank Service Charge Check if Austin, TX, officeholder living expense Bank Service Charge							
9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							
Date	Payee name						
02/15/2024	Cole Hefner Campaign						
Amount (\$)	Payee address; City; State; Zip Coo	e					
\$5,000.00	PO Box 167						
Expenditure from corporate funds	Mount Pleasant, TX 75456						
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					
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office soug H	ht Office held					
Date	Payee name						
02/20/2024	Dade Phelan Campaign						
Amount (\$)	Payee address; City; State; Zip Code						
\$25,000.00	P.O. Box 5990						
Expenditure from corporate funds	Austin, TX 78763						
PURPOSE OF		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 Campaign Contribution					
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office soug H	ht Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting 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: 3/11 Rpt: 13/21	Texans For Responsible Government PAC 00085127				
4 Date	5 Payee name				
02/12/2024	David Spiller Campaign				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$10,000.00	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				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
02/09/2024	Dustin Burrows Campaign				
Amount (\$)	Payee address; City; State; Zip Code				
\$5,000.00	PO Box 2569				
Expenditure from corporate funds	Lubbock, TX 79408				
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 				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
02/15/2024	Ellen Troxclair for Texas				
Amount (\$)	Payee address; City; State; Zip Code				
\$40,000.00	701 HWY 281, Suite H #196				
Expenditure from corporate funds	Marble Falls, TX 78654				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District - Gitt/Awards/Memorials Expense Printing Expense Travel Out of District Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 4/11 Rpt: 14/21	Texans For Responsible Government PAC00085127	
4 Date	5 Payee name	
02/16/2024	Ellen Troxclair for Texas	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$60,000.00	701 HWY 281, Suite H #196	
Expenditure from corporate funds	Marble Falls, TX 78654	
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	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
02/20/2024	Greg Bonnen Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$5,000.00	PO Box 1183	
Expenditure from corporate funds	Friendswood, TX 77549	
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 	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
02/20/2024	JR Rameriz for Texas	
Amount (\$)	Payee address; City; State; Zip Code	
\$25,000.00	PO Box 2134	
Expenditure from corporate funds	Uvalde, TX 78802	
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 	
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Glft/Awards/Memorials Expense Printing Expense Travel Out of District	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 5/11 Rpt: 15/21	Texans For Responsible Government PAC 00085127	
4 Date	5 Payee name	
02/09/2024	Jacey Jetton Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$10,000.00	1723 Hearthside Ct.	
Expenditure from corporate funds	Richmond, TX 77406	
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 Check if Austin, TX, officeholder living expense	
	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	
02/21/2024	Jacey Jetton Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$35,000.00	1723 Hearthside Ct.	
Expenditure from corporate funds	Richmond, TX 77406	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
	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	Jill Dutton for Texas House Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$50,000.00	411 VZCR 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 Candidate/Officeholder/Political Committee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District - Gift/Awards/Memorials Expense Printing Expense Travel Out of District	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 6/11 Rpt: 16/21	Texans For Responsible Government PAC 00085127	
4 Date 02/12/2024	5 Payee name Kitzman for Texas	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$5,000.00	PO Box 553	
Expenditure from corporate funds	Pattison, TX 77466	
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 Check if Austin, TX, officeholder living expense Campaign Contribution Campaign Contribution	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
01/29/2024	Kronda Thimesch Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$10,000.00	2516 Sir Tristram Lane	
Expenditure from corporate funds	Lewisville, TX 75056	
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 	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
02/14/2024	Kronda Thimesch Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$10,000.00	2516 Sir Tristram Lane	
Expenditure from corporate funds	Lewisville, TX 75056	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting 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: 7/11 Rpt: 17/21	Texans For Responsible Government PAC 00085127	
4 Date	5 Payee name	
02/15/2024	Kronda Thimesch Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$30,000.00	2516 Sir Tristram Lane	
Expenditure from corporate funds	Lewisville, TX 75056	
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	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
02/21/2024	Leon Strategies	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,860.82	PO Box 311	
Expenditure from corporate funds	Leander, TX 78646	
PURPOSE OF EXPENDITURE	 (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. 	
EAFENDITORE	Candidate/Officeholder/Political Committee	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
01/29/2024	Lynn Stucky Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$10,000.00	PO Box 464	
Expenditure from corporate funds	Denton, TX 76202	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 8/11 Rpt: 18/21	Texans For Responsible Government PAC	00085127
4 Date	5 Payee name	
02/14/2024	Lynn Stucky Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$15,000.00	PO Box 464	
Expenditure from corporate funds	Denton, TX 76202	
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	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
02/20/2024	Lynn Stucky Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$25,000.00	PO Box 464	
Expenditure from corporate funds	Denton, TX 76202	
PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ntribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
01/30/2024	Mano DeAyala Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$10,000.00	12335 Kingsride Lane #416	
Expenditure from corporate funds	Houston, TX 77024	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	utside of Texas. Complete Schedule T.
EXPENDITURE		TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting 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: 9/11 Rpt: 19/21	Texans For Responsible Government PAC 00085127		
4 Date	5 Payee name		
02/20/2024	Mano DeAyala Campaign		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$15,000.00	12335 Kingsride Lane #416		
Expenditure from corporate funds	Houston, TX 77024		
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		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
02/15/2024	Pat Curry Campaign		
Amount (\$)	Payee address; City; State; Zip Code		
\$10,000.00	204 Woodhew Drive		
Expenditure from corporate funds	Waco, TX 76712		
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 tavel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution 		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
01/29/2024	Stan Gerdes for State Representative Campaign		
Amount (\$)	Payee address; City; State; Zip Code		
\$10,000.00	PO Box 1060		
Expenditure from corporate funds	Smithville, TX 78957		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee		
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nt & Related Expense
1 Total pages Schedule F1:	: 2 FILER NAME 3 Filer ID (Ethi	cs Commission Filers)
Sch: 10/11 Rpt: 20/21	Texans For Responsible Government PAC 00085127	
4 Date	5 Payee name	
02/15/2024	Stan Gerdes for State Representative Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$15,000.00	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 Candidate/Officeholder/Political Committee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	I I Candidate/Officeholder name Office sought Office held DH	
Date	Payee name	
02/09/2024	Stephanie B Klick Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$10,000.00	PO Box 7592	
Expenditure from corporate funds	Fort Worth, TX 76111	
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 So Check if Austin, TX, officeholder living expenses Campaign Contribution 	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	
Date	Payee name	
02/16/2024	Stephanie B Klick Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$25,000.00	PO Box 7592	
Expenditure from 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 Candidate/Officeholder/Political Committee	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held DH	

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al 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: 11/11 Rpt: 21/21	Texans For Responsible Government PAC 00085127
4 Date 02/14/2024	5 Payee name Texans for Trent Ashby
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code PO Box 412
Expenditure from corporate funds	Lufkin, TX 75902
8 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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H