

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

| | | | |
|---|--|--|-----------------------------------|
| The GPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00064956 | 2 Total pages filed: 33 |
| 3 COMMITTEE NAME Texas Consumer Lenders PAC | | OFFICE USE ONLY | |
| | | Date Received ELECTRONICALLY FILED 02/26/2024 | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 8801 Ambassador Row Dallas, TX 75247 | |
| | | Date Hand-delivered or Date Postmarked | |
| | | Receipt # | Amount |
| | | Date Processed | |
| | | Date Imaged | |
| 5 CAMPAIGN TREASURER NAME | | MS / MRS / MR FIRST MI Mr. C. Dan NICKNAME LAST SUFFIX Adams | |
| 6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small> | | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 8801 Ambassador Row Dallas, TX 75247 | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 84 Villa Road Greenville, SC 29615 | |
| 8 CAMPAIGN TREASURER PHONE | | AREA CODE PHONE NUMBER EXTENSION (864) 672-8400 | |
| 9 REPORT TYPE | | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff | |
| 10 PERIOD COVERED | | Month Day Year Month Day Year 01/01/2024 THROUGH 02/24/2024 | |
| 11 ELECTION | | ELECTION DATE ELECTION TYPE Month Day Year <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 03/05/2024 <input type="checkbox"/> General <input type="checkbox"/> Special | |

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

| | |
|--|---|
| 12 COMMITTEE NAME Texas Consumer Lenders PAC | 13 Filer ID (Ethics Commission Filers) 00064956 |
|--|---|

| | | |
|---|--|-------------------|
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported |
| | | 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.) | Rep. Angie Button |

| | | |
|-------------------------------|---|---------------|
| 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 101,750.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 86,000.00 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 16,077.12 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 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. C. Dan Adams

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

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|---|---|---|
| 12 COMMITTEE NAME Texas Consumer Lenders PAC | | 13 Filer ID (Ethics Commission Filers) 00064956 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small> | A. Supported B. Opposed |
| | 2. Measures <small>(Describe by date and location of election and nature of issue.)</small> | A. Supported B. Opposed |
| | 3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small> | Rep. Ben Bumgarner State Representative |
| | 1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small> | A. Supported B. Opposed |
| | 2. Measures <small>(Describe by date and location of election and nature of issue.)</small> | A. Supported B. Opposed |
| | 3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small> | Rep. Candy Noble State Representative |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small> | A. Supported B. Opposed |
| | 2. Measures <small>(Describe by date and location of election and nature of issue.)</small> | A. Supported B. Opposed |
| | 3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small> | Rep. Charlie Geren State Representative |

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| 12 COMMITTEE NAME Texas Consumer Lenders PAC | | 13 Filer ID (Ethics Commission Filers) 00064956 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Cody Harris State Representative |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Cole Hefner State Representative |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Dade Phelan State Representative |

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| 12 COMMITTEE NAME Texas Consumer Lenders PAC | | 13 Filer ID (Ethics Commission Filers) 00064956 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Mr. Daniel Alders State Representative 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.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. David Spiller State Representative |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Dewayne Burns State Representative |

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| 12 COMMITTEE NAME Texas Consumer Lenders PAC | | 13 Filer ID (Ethics Commission Filers) 00064956 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Drew Darby State Representative |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Dustin Burrows State Representative |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Ernest Bailes State Representative | |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Fredrick Fraizer State Representative |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Gary VanDeaver State Representative |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Greg Bonnen State Representative |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Hugh Shine |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Jacey Jetton State Representative |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Janie Lopez State Representative |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Jay Dean State Representative |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Jeff Leach State Representative |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Jill Dutton State Representative |

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| 12 COMMITTEE NAME Texas Consumer Lenders PAC | | 13 Filer ID (Ethics Commission Filers) 00064956 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. John Kuempel State Representative |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Keith Bell State Representative |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Ken King State Representative |

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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Stan Kitzman State Representative |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Kronda Thimesch State Representative |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Lacey Hull State Representative | |

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| 12 COMMITTEE NAME Texas Consumer Lenders PAC | | 13 Filer ID (Ethics Commission Filers) 00064956 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Lynn Stuckey State Representative |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Matt Shaheen State Representative |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Matt Shaheen State Representative |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Sen. Paul Bettencourt State Senator |

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| 12 COMMITTEE NAME Texas Consumer Lenders PAC | | 13 Filer ID (Ethics Commission Filers) 00064956 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Mr. Paul Dyson State Representative 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.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Reggie Smith State Representative |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Shelby Slawson State Representative |

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| 12 COMMITTEE NAME Texas Consumer Lenders PAC | | 13 Filer ID (Ethics Commission Filers) 00064956 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Stan Gerdes State Representative |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Stan Lambert State Representative |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Steve Allison State Representative |

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| 12 COMMITTEE NAME Texas Consumer Lenders PAC | | 13 Filer ID (Ethics Commission Filers) 00064956 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Steve Toth State Representative |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Terry Wilson State Representative |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | The Honorable Dan Patrick Lieutenant Governor |

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| 12 COMMITTEE NAME Texas Consumer Lenders PAC | | 13 Filer ID (Ethics Commission Filers) 00064956 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Travis Clardy State Representative |
| | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Trent Ashby State Representative |
| COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported 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.) | Rep. Ellen Troxclair State Representative |

SUBTOTALS - GPAC

| | | |
|--|---|---|
| 17 COMMITTEE NAME Texas Consumer Lenders PAC | | 18 Filer ID (Ethics Commission Filers) 00064956 |
| 19 SCHEDULE SUBTOTALS | | SUBTOTAL AMOUNT |
| | NAME OF SCHEDULE | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 101,750.00 |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 5. | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 6. | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 7. | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 8. | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 9. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 10. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 86,000.00 |
| 11. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 13. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 14. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 15. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/1 Rpt: 18/33 |
| 2 FILER NAME Texas Consumer Lenders PAC | | 3 Filer ID (Ethics Commission Filers) 00064956 |
| 4 Date 02/02/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, C Dan (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Greenville, SC 29615 | 7 Amount of Contribution (\$) \$43,000.00 |
| 8 Principal occupation / Job title (See Instructions) President | | 9 Employer (See Instructions) The Capital Corporation |
| Date 02/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brunner, Priscilla <hr/> Contributor address; City; State; Zip Code Dayton, OH 45419 | Amount of Contribution (\$) \$58,750.00 |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) DRKE LLC |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 1/15 Rpt: 19/33 | 2 FILER NAME Texas Consumer Lenders PAC | 3 Filer ID (Ethics Commission Filers) 00064956 |
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| 4 Date 02/02/2024 | 5 Payee name Angie Chen Button Campaign |
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|---|---|
| 6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 83274 Richardson, TX 75083 |
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| 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Ben Bumgarner Campaign |
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| Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 5150 Kensington Court Flower Mound, TX 75022 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Candy Noble Campaign |
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| Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1105 E Main St #223 Allen, TX 75002 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 2/15 Rpt: 20/33 | 2 FILER NAME Texas Consumer Lenders PAC | 3 Filer ID (Ethics Commission Filers) 00064956 |
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| 4 Date 02/02/2024 | 5 Payee name Charlie Geren Campaign |
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| 6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 1140 Fort Worth, TX 76101 |
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| 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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| Date 02/02/2024 | Payee name Cody Harris Campaign |
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| Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1007 N Mallard St Palestine, TX 75801 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Cole Hefner for State Representative |
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| Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 167 Mount Pleasant, TX 75456 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 3/15 Rpt: 21/33 | 2 FILER NAME Texas Consumer Lenders PAC | 3 Filer ID (Ethics Commission Filers) 00064956 |
| 4 Date 02/02/2024 | 5 Payee name Dade Phelan Campaign | |
| 6 Amount (\$) \$25,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 848 Nederland, TX 77627 | |
| 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/02/2024 | Payee name Daniel Alders For Texas | |
| Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 8907 Tyler, TX 75711 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/02/2024 | Payee name David Spiller for Texas Campaign | |
| Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 447 Jacksboro, TX 76458 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 4/15 Rpt: 22/33 | 2 FILER NAME Texas Consumer Lenders PAC | 3 Filer ID (Ethics Commission Filers) 00064956 |
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| 4 Date 02/02/2024 | 5 Payee name DeWayne Burns Campaign |
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| 6 Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 703 Stonelake Drive Cleburne, TX 76033 |
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| 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Drew Darby Campaign |
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| Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 3284 San Angelo, TX 76902 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Dustin Burrows Campaign |
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| Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 2569 Lubbock, TX 79408 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 5/15 Rpt: 23/33 | 2 FILER NAME Texas Consumer Lenders PAC | 3 Filer ID (Ethics Commission Filers) 00064956 |
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| 4 Date 02/02/2024 | 5 Payee name Ernest Bailes Campagin |
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| 6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1000 Bailes Dairy Road Shepherd, TX 77371 |
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| 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Fredrick Frazier Campaign |
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| Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4100 Eldorado Pkwy Suite 100 McKinney, TX 75070 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Gary VanDeaver Campaign |
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| Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1101 Hwy 98 New Boston, TX 75570 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 6/15 Rpt: 24/33 | 2 FILER NAME Texas Consumer Lenders PAC | 3 Filer ID (Ethics Commission Filers) 00064956 |
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| 4 Date 02/02/2024 | 5 Payee name Greg Bonnen Campaign |
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| 6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 1183 Friendswood, TX 77549 |
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| 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Jacey Jetton Campaign |
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| Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1723 HearthSide Ct Richmond, TX 77406 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Janie Lopez Campaign |
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| Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 2073 San Benito, TX 78586 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 7/15 Rpt: 25/33 | 2 FILER NAME Texas Consumer Lenders PAC | 3 Filer ID (Ethics Commission Filers) 00064956 |
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| 4 Date 02/02/2024 | 5 Payee name Jay Dean for Texas |
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| 6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 3822 Holly Ridge Longview, TX 75605 |
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| 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Jeff Leach Campaign |
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| Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code P.O. Box 866186 Plano, TX 75086 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Jill Dutton Campaign |
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| Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 411 VZCR 4503 Ben Wheeler, TX 75754 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
|-------------------------------|---|--|

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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 8/15 Rpt: 26/33 | 2 FILER NAME Texas Consumer Lenders PAC | 3 Filer ID (Ethics Commission Filers) 00064956 |
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| 4 Date 02/02/2024 | 5 Payee name John Kuempel Campaign |
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| 6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 523 E. Donegan #102 Seguin, TX 78155 |
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| 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
|---------------------------------|---|--|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Keith Bell Campaign |
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| Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 1178 Forney, TX 75126 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Ken King for State Representative |
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| Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code P.O. Box 517 Canadian, TX 79014 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 9/15 Rpt: 27/33 | 2 FILER NAME Texas Consumer Lenders PAC | 3 Filer ID (Ethics Commission Filers) 00064956 |
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| 4 Date 02/02/2024 | 5 Payee name Kitzman for Texas |
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| 6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 553 Pattison, TX 77466 |
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| 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Krona Thimesch Campaign |
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| Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 118978 Carrolton, TX 75011-8978 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Lacey Hull Campaign |
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| Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 19231 Houston, TX 77224 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 10/15 Rpt: 28/33 | 2 FILER NAME Texas Consumer Lenders PAC | 3 Filer ID (Ethics Commission Filers) 00064956 |
| 4 Date 02/02/2024 | 5 Payee name Lynn Stucky Campaign | |
| 6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 464 Denton, TX 76202 | |
| 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/02/2024 | Payee name Matt Shaheen Campaign | |
| Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3917 Malton Drive Plano, TX 75025 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/02/2024 | Payee name Paul Bettencourt Campaign | |
| Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1 E. Greenway Plaza Ste 225 Houston, TX 77046 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 11/15 Rpt: 29/33 | 2 FILER NAME Texas Consumer Lenders PAC | 3 Filer ID (Ethics Commission Filers) 00064956 |
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| 4 Date 02/02/2024 | 5 Payee name Paul Dyson for Texas |
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| 6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 4040 Hwy 6 Ste 300 College Station, TX 77845 |
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| 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Reggie Smith Campaign |
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| Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 300 N. Travis Street Sherman, TX 75090 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Shelby Slawson Campaign |
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| Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 910 Old Hico Rd Stephenville, TX 76401 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 12/15 Rpt: 30/33 | 2 FILER NAME Texas Consumer Lenders PAC | 3 Filer ID (Ethics Commission Filers) 00064956 |
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| 4 Date 02/02/2024 | 5 Payee name Shine for Texas |
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| 6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code P.O. Box 793 Temple, TX 76503 |
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| 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Stan Gerdes for State Representative |
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| Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 606 Gresham Street Smithville, TX 78957 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Steve Allison Campaign |
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| Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 14546 Brook Hollow Blvd Box 511 San Antonio, TX 78232 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 13/15 Rpt: 31/33 | 2 FILER NAME Texas Consumer Lenders PAC | 3 Filer ID (Ethics Commission Filers) 00064956 |
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| 4 Date 02/02/2024 | 5 Payee name Steve Toth for State House |
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| 6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 67 Chestnut Meadow Drive Suite 100 Conroe, TX 77384 |
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| 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Terry Wilson Campaign |
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| Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code P.O. Box 489 Marble Falls, TX 78654 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 02/02/2024 | Payee name Texans for Dan Patrick |
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| Amount (\$) \$25,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 685085 Austin, TX 78768 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 14/15 Rpt: 32/33 | 2 FILER NAME Texas Consumer Lenders PAC | 3 Filer ID (Ethics Commission Filers) 00064956 |
| 4 Date 02/02/2024 | 5 Payee name Texans for Stan Lambert | |
| 6 Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code P.O. Box #3752 Abilene, TX 79604 | |
| 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/02/2024 | Payee name Travis Clardy Campaign | |
| Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 209 E. Main Street Nacogdoches, TX 75961 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/02/2024 | Payee name Trent Ashby Campaign | |
| Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code P.O. Box 412 Lufkin, TX 75902 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 15/15 Rpt: 33/33 | 2 FILER NAME Texas Consumer Lenders PAC | 3 Filer ID (Ethics Commission Filers) 00064956 | |
| 4 Date 02/02/2024 | 5 Payee name Troxclair for Texas | | |
| 6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 701 Hwy 281 Suite H #196 Marble Falls, TX 78654 | | |
| 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |