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) 00084495				2 Total pages filed: 12	
3	COMMITTEE NAME					OFFICE USE ONLY
	Texas Now PAC					Date Received
						02/26/2024
			<u></u>	STATE: ZIP CODE	-	0212012024
4	COMMITTEE ADDRESS		TY;	STATE; ZIP CODE	-	
		PO Box 341027				Date Hand-delivered or Date Postmarked
	Change of Address					
		Austin, TX 78734				Receipt # Amount
						Date Processed
						Date Imaged
5	CAMPAIGN	MS / MRS / MR FIRST				MI
	TREASURER	Ms. Shannon				
	NAME					
		NICKNAME LAST				SUFFIX
		Rusing				
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE)		APT / SUITE #; CI	ΓY·	STATE; ZIP CODE
•	TREASURER	14425 Falcon Head Blvd, Bldg E-100		// oon/, on	,	
	STREET ADDRESS					
		Austin TV 70720				
_	(Residence or Business)	Austin, TX 78738				
7	CAMPAIGN TREASURER	STREET OR PO BOX;		APT / SUITE #; C	ITY;	STATE; ZIP CODE
	MAILING	PO Box 341027				
	ADDRESS					
	Change of Address	Austin, TX 78734				
8	CAMPAIGN	AREA CODE PHONE NUMBER	EX	TENSION		
	TREASURER	(512) 217-3303				
	PHONE					
9	REPORT	January 15	0th (day before election	Г	Dissolution (Attach PAC-DR)
	TYPE			-		
		X 8	th da	ay before election		10th day after campaign treasurer termination
			Runo	ff		
10	PERIOD	Month Day Year		Month Da	av	Year
	COVERED	-	HR	DUGH 02/24/2		
				·_/_ /-		
11	ELECTION	ELECTION DATE		ELECTION TYPE		
			Prim			Other
		03/05/2024	Con			
			Gen	eral Special		
	GO TO PAGE 2					
Ļ						
F0I	Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.9000c47f					

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer I	ID (Ethics Commission Filers)
Texas Now PAC			00084	4495
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Glen Rogers State Represe	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	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)	:	\$ 500,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	:	\$ 0.00
	4. TOTAL POLITICA	L EXPENDITURES	:	\$ 402,145.61
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAS G PERIOD	T DAY	\$ 677,003.24
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD		\$ 0.00
16 AFFIDAVIT	•			
		I swear, or affirm, under penalty of true and correct and includes all inf under Title 15, Election Code.		
			nnon Rus	-
		Signature of C	ampaign I	reasurer
AFFIX NOTARY STAMP / SEAL ABOVE				
			, this the	day
of	, 20, to certify v	vhich, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title o	of officer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V3.5.1.9000c47f

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC

Page 3 of 12

Texas Now PAC 00084495 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary) 1. Candidates methods, same of approximation of plain paper to complete this report if necessary) A. Supported Decore by cons and Decore by cons and there of taxes) B. Opposed 2. Measures Decore by cons and there of taxes) A. Supported Decore by cons and Decore by cons and Assisted A. Supported Decore by cons and Decore by cons and Assisted A. Supported Decore by cons and Decore by cons and Assisted COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary) 1. Candidates Decore by cons and Assisted A. Supported Kronda Thimesch State Representative 2. Measures COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary) 1. Candidates Decore by cons and Assisted Decore by cons and Decore by cons and De	12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
ACTIVITY Receive yourse unit and the second sec	Texas Now PAC				00084495	
paper to complete this report if necessary) 2. Measures (Describe to tell and name of lease) A. Supported 2. Measures (Describe to tell and name of lease) A. Supported 3. Officeholders Assisted A. Supported COMMITTEE (ACTIVITY 1. Condidates (Descrip to prame of apperts) complete this report if necessary) A. Supported COMMITTEE (ACTIVITY 1. Condidates (Descrip to prame of apperts) complete this report if necessary) A. Supported 2. Measures report if necessary) 2. Measures (Descrip to prame of apperts) A. Supported 3. Officeholders ACTIVITY 1. Supported Supported 4. Supported 5. Opposed 5. Opposed 5. Opposed 6. Opposed 5. Opposed 7. Measures report if necessary) 6. Opposed 8. Opposed 6. Opposed 8. Opposed 6. Opposed 9. Opposed 8. Opposed 1. Condidates apport in complete this report if necessary) 6. Supported 1. Officeholders Activity y name or it apperts or nece if apperts or nece if a				Stan Gerdes State Representat	ive	
Describe ty date and mater of issue) Describe ty date and mater of issue) B. Opposed 3. Officeholders Assisted B. Supported Kronda Thimesch State Representative COMMITTEE ACTIVITY 1. Candidates indexity by name, or, if applicable, dasable by party, i A. Supported Kronda Thimesch State Representative (Attach lists on plain report if necessary.) 2. Measures indexity of election and mater of issue) A. Supported Supported 2. Measures insport if necessary.) 3. Officeholders Assisted A. Supported Supported 3. Officeholders Assisted A. Supported Supported Supported COMMITTEE ACTIVITY 1. Candidates insport if necessary.) A. Supported Supported Supported Supported Supported Supported Gomer or, if inpact if necessary.) A. Supported Supported Stephanie Klick State Representative COMMITTEE ACTIVITY 1. Candidates Observe by party. A. Supported Supported Supported Supported 3. Officeholders Assisted A. Supported Supported Supported Gland Atta nitize on plain mater of issue of Mater of issue on the mater of issue on the mater of issue on the A. Sup	paper to complete this		B. Opposed			
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paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported 2. Measures (Describe by date and location of election and nature of issue.) A. Supported 3. Officeholders Assisted (dentity by name or, if applicable, classify by party.) A. Supported COMMITTEE ACTIVITY 1. Candidates (dentity by name or, if applicable, classify by party.) A. Supported Committing applicable, classify by party.) B. Opposed Image: Committing applicable, classify by party.) A. Supported State of issue, in this is a plain paper to complete this report if necessary.) Committing applicable, classify by party.) B. Opposed B. Opposed 3. Officeholders Assisted location of size.) A. Supported 3. Officeholders Assisted A. Supported				Kronda Thimesch State Repres	entative	
Describe by date and location and nature of issue.) B. Opposed 3. Officeholders A. Supported Assisted (Identity by name or, if applicable, classify by party.) COMMITTEE 1. Candidates (Identity by name or, if applicable, classify by party.) (Attach lists on plain paper to complete this report if necessary.) B. Opposed 2. Measures Describe by date and location of election and nature of issue.) B. Opposed A. Supported Supposed B. Opposed	paper to complete this		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.) 2. Measures (Describe by date and locate of lissue.) A. Supported B. Opposed B. Opposed B. Opposed		(Describe by date and location of election and	A. Supported			
Assisted (Identify by name or, if applicable, classify by party.) A. Supported Stephanie Klick State Representative COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) A. Supported Stephanie Klick 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 B. Opposed 3. Officeholders Assisted (Identify by name or, if paper or, if B. Opposed			B. Opposed			
ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if		Assisted (Identify by name or, if				
paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 4. Supported B. Opposed B. Opposed 3. Officeholders Assisted (Identify by name or, if		(Identify by name or, if		Stephanie Klick State Represen	tative	
(Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if Image: Comparison of the second	paper to complete this		B. Opposed			
3. Officeholders Assisted (Identify by name or, if		(Describe by date and location of election and	A. Supported			
Assisted (Identify by name or, if			B. Opposed			
		Assisted				

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC

Page 4 of 12

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Now PAC				00084495	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Reggie Smith State Representa	tive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	1				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Lacey Hull 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.)		Christi Craddick Railroad Comm	issioner	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				

SI	JBT	FORM GPAC		
		EE NAME w PAC	18 Filer ID 00084495	5 of 12 (Ethics Commission Filers)
		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 500,000.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 402,145.61
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

MONETAI	RY POLITICAL CONTRIBUTION	IS	SCHEDULE A1
The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 1/1 Rpt: 6/12
2 FILER NAME Texas Now PAC	:		3 Filer ID (Ethics Commission Filers) 00084495
01/12/2024			7 Amount of Contribution (\$)\$250,000.00
	San Ramon, CA 94583on / Job title (See Instructions)9	Employer (See Instructions)	
02/16/2024			Amount of Contribution (\$) \$250,000.00
	Dallas, TX 75225 on / Job title (See Instructions)	Employer (See Instructions)	

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment					
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
Sch: 1/6 Rpt: 7/12	Texas Now PAC 00084495				
4 Date	5 Payee name				
02/16/2024	Laurens Group				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$188,228.41	342 East Bay Street				
Expenditure from corporate funds	Charleston, SC 29401				
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texting Service 				
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/O	H Craddick, Christi Railroad Commissioner Railroad Commissioner				
Date	Payee name				
02/16/2024	Laurens Group				
Amount (\$)	Payee address; City; State; Zip Code				
\$50,000.00	342 East Bay Street				
Expenditure from corporate funds	Charleston, SC 29401				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Digital Ads 				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/O	H Craddick, Christi Railroad Commissioner Railroad Commissioner				
Date	Payee name				
02/16/2024	Laurens Group				
Amount (\$)	Payee address; City; State; Zip Code				
\$4,639.73	342 East Bay Street				
Expenditure from corporate funds	Charleston, SC 29401				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texting Service 				
Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/O	H Rogers, Glen State Representative District 60 State Representative District 60				

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

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:					
Sch: 2/6 Rpt: 8/12	Texas Now PAC 00084495				
4 Date					
4 Date 02/16/2024	5 Payee name Laurens Group				
6 Amount (\$) \$2,520.34	7 Payee address; City; State; Zip Code 342 East Bay Street				
Expenditure from corporate funds	Charleston, SC 29401				
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texting Service 				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder nameOffice soughtOffice heldIGerdes, StanState Representative District 17State Representative District 17				
Date	Payee name				
02/16/2024	Laurens Group				
Amount (\$)	Payee address; City; State; Zip Code				
\$2,867.56	342 East Bay Street				
Expenditure from corporate funds	Charleston, SC 29401				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texting Service 				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/O	¹ Thimesch, Kronda State Representative District 65 State Representative District 65				
Date	Payee name				
02/16/2024	Laurens Group				
Amount (\$)	Payee address; City; State; Zip Code				
\$2,274.60	342 East Bay Street				
Expenditure from corporate funds	Charleston, SC 29401				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texting Service 				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/O	⁺ Klick, Stephanie State Representative District 91 State Representative District 91				

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor now to complete this form.	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: 3/6 Rpt: 9/12	Texas Now PAC		00084495			
4 Date	5 Payee name					
02/16/2024	Laurens Group					
6 Amount (\$)	7 Payee address; City; State;	Zip Code				
\$3,638.85	342 East Bay Street					
Expenditure from corporate funds	Charleston, SC 29401					
8 PURPOSE	(a) Category (See Categories listed at the top of this sche	edule) (b) Description				
OF EXPENDITURE	Advertising Expense		butside of Texas. Complete Schedule T.			
		Texting Servi	TX, officeholder living expense			
		Texting Servi				
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder name C	Inffice sought	Office held			
expenditure to benefit C/O		0	ict 62 State Representative District 62			
Date	Payee name					
02/16/2024	Laurens Group					
Amount (\$)	Payee address; City; State;	Zip Code				
\$2,114.63	342 East Bay Street					
Expenditure from corporate funds	Charleston, SC 29401					
PURPOSE	(a) Category (See Categories listed at the top of this sche	edule) (b) Description				
OF EXPENDITURE	Advertising Expense		butside of Texas. Complete Schedule T.			
		Texting Servi	TX, officeholder living expense			
Complete <u>ONLY</u> if direct	Candidate/Officeholder name C	Inffice sought	Office held			
expenditure to benefit C/O			ict 138 State Representative District			
	1					
Date	Payee name					
02/16/2024	Laurens Group					
Amount (\$)		Zip Code				
\$2,000.00	342 East Bay Street					
Expenditure from corporate funds	Charleston, SC 29401					
PURPOSE	(a) Category (See Categories listed at the top of this sche	edule) (b) Description				
OF EXPENDITURE	Consulting Expense		butside of Texas. Complete Schedule T.			
			TX, officeholder living expense			
		Creative Con	Sumny			
Complete <u>ONLY</u> if direct expenditure to benefit C/O		ffice sought	Office held			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

	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:					
Sch: 4/6 Rpt: 10/12	Texas Now PAC 00084495				
4 Date	5 Payee name				
02/14/2024	Mammoth Marketing Group				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$23,941.92	4500 Bissonnet St., Ste. 370				
Expenditure from corporate funds	Bellaire, TX 77401				
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailer Printing/Production/Postage 				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder nameOffice soughtOffice heldIRogers, GlenState Representative District 60State Representative District 60				
Date	Payee name				
02/14/2024	Mammoth Marketing Group				
Amount (\$) \$23,941.92	Payee address;City;State;Zip Code4500 Bissonnet St., Ste. 370				
Expenditure from corporate funds	Bellaire, TX 77401				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailer Printing/Production/Postage 				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/OF	¹ Gerdes, Stan State Representative District 17 State Representative District 17				
Date	Payee name				
02/14/2024	Mammoth Marketing Group				
Amount (\$) \$23,941.92	Payee address;City;State;Zip Code4500 Bissonnet St., Ste. 370				
Expenditure from corporate funds	Bellaire, TX 77401				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailer Printing/Production/Postage 				
Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/OH Thimesch, Kronda State Representative District 65 State Representative District 65					

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment					
1 Total pages Schedule F1:					
Sch: 5/6 Rpt: 11/12	Texas Now PAC 00084495				
4 Date 02/14/2024	5 Payee name Mammoth Marketing Group				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$23,941.91	4500 Bissonnet St., Ste. 370				
Expenditure from corporate funds	Bellaire, TX 77401				
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailer Printing/Production/Postage 				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder nameOffice soughtOffice heldHKlick, StephanieState Representative District 91State Representative District 91				
Date	Payee name				
02/14/2024	Mammoth Marketing Group				
Amount (\$) \$23,941.91	Payee address; City; State; Zip Code 4500 Bissonnet St., Ste. 370				
Expenditure from corporate funds	Bellaire, TX 77401				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailer Printing/Production/Postage 				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/O	H Smith, Reggie State Representative District 62 State Representative District 62				
Date 02/14/2024	Payee name Mammoth Marketing Group				
Amount (\$) \$23,941.91	Payee address; City; State; Zip Code 4500 Bissonnet St., Ste. 370				
Expenditure from corporate funds	Bellaire, TX 77401				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mailer Printing/Production/Postage 				
Complete ONLY if directCandidate/Officeholder nameOffice soughtOffice heldexpenditure to benefit C/OHHull, LaceyState Representative District 138 State Representative District					

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Offic Food/Beverage Expense Polli Gift/Awards/Memorials Expense Prin	Repayment/Reimbursement e Overhead/Rental Expense ng Expense ing Expense ries/Wages/Contract Labor	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: 6/6 Rpt: 12/12	Texas Now PAC		00084495			
4 Date	5 Payee name					
01/05/2024	RightSide Compliance					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$180.00	PO Box 341027					
Expenditure from corporate funds	Austin, TX 78734					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Consulting Expense		ide of Texas. Complete Schedule T.			
			, officeholder living expense			
		Compliance Co	nsulting			
9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
Date	Payee name					
01/21/2024	Truist					
Amount (\$)	Payee address; City; State; Zig	Code				
\$15.00						
\$15.00	611 W 5th St					
Expenditure from corporate funds	Austin, TX 78701					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		ide of Texas. Complete Schedule T. , officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		sought	Office held			
Data	2					
Date	Payee name					
02/21/2024	Truist					
Amount (\$)	Payee address; City; State; Zip	Code				
\$15.00	611 W 5th St					
Expenditure from corporate funds	Austin, TX 78701					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Accounting/Banking		ide of Texas. Complete Schedule T.			
			, officeholder living expense			
		Bank Fee				
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		sought	Office held			