

# CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

<b>1</b> Filer ID (Ethics Commission Filers) 00088032	<b>2</b> Total pages filed: 45	<b>OFFICE USE ONLY</b>	
<b>3</b> COMMITTEE NAME AFC Victory Fund			Date Received <b>ELECTRONICALLY FILED 04/28/2024</b>
<b>4</b> TREASURER NAME Lisker, Lisa			Date Hand-delivered or Date Postmarked
<b>5</b> ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	Receipt #
	<input type="checkbox"/> July 15	<input type="checkbox"/> 10th day after campaign treasurer resignation	
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Dissolution report	Date Processed
	<input type="checkbox"/> 8th day before election	<input checked="" type="checkbox"/> Other (specify) <u>February 5</u>	Date Imaged
<b>6</b> ORIGINAL PERIOD COVERED	Month Day Year 12/26/2023	THROUGH	Month Day Year 01/25/2024

**7 EXPLANATION OF CORRECTION**  
The Committee received notification of the in kind after the original report was filed.

**8 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

**Semiannual reports:** I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

**Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Lisa Lisker  
\_\_\_\_\_  
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

**Remember To Attach Any Part Of The Campaign Finance Report Form  
Needed To Report And Explain Corrections**



# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> AFC Victory Fund	<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed Gary VanDeaver State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,529,782.92
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 783,665.25
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 5,019,606.64
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 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.

Lisa Lisker  
\_\_\_\_\_  
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

# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

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<b>12 COMMITTEE NAME</b> AFC Victory Fund		<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed    Travis Clardy    State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
	<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)
B. Opposed    Ernest Bailey    State Representative		
<b>2. Measures</b> (Describe by date and location of election and nature of issue.)		A. Supported
		B. Opposed
<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)		
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)		<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)
	B. Opposed    Justin Holland    State Representative	
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

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<b>12 COMMITTEE NAME</b> AFC Victory Fund	<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
----------------------------------------------	-----------------------------------------------------------

<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed    John Kuempel    State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed    Hugh Shine    State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed    DeWayne Burns    State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

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<b>12 COMMITTEE NAME</b> AFC Victory Fund		<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported  B. Opposed Glenn Rogers State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported  B. Opposed Reggie Smith State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported  B. Opposed Stan Lambert State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

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<b>12 COMMITTEE NAME</b> AFC Victory Fund	<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
----------------------------------------------	-----------------------------------------------------------

<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed    Drew Darby    State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed    Steve Allison    State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed    Charlie Geren    State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

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<b>12 COMMITTEE NAME</b> AFC Victory Fund	<b>13 Filer ID</b> (Ethics Commission Filers) 00088032
----------------------------------------------	-----------------------------------------------------------

<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed    Keith Bell    State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed    Ken King    State Representative
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	



# SUBTOTALS - MPAC

<b>17 COMMITTEE NAME</b> AFC Victory Fund		<b>18 Filer ID</b> (Ethics Commission Filers) 00088032
<b>19 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,520,550.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 9,232.92
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	\$ 783,665.25
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**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/3 Rpt: 10/45
<b>2</b> FILER NAME AFC Victory Fund		<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 12/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeVos, Betsy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Grand Rapids, MI 49503	<b>7</b> Amount of Contribution (\$)  \$500,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Executive		<b>9</b> Employer (See Instructions) Windquest Group
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeVos, Dick <hr/> Contributor address; City; State; Zip Code  Grand Rapids, MI 49503	Amount of Contribution (\$)  \$500,000.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Windquest Group
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Future of Education LLC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746	Amount of Contribution (\$)  \$250,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gardner, Tim <hr/> Contributor address; City; State; Zip Code  Providence, UT 84332	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Utah State University
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hine, Gilbert Clarendon <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78260	Amount of Contribution (\$)  \$50,000.00
Principal occupation / Job title (See Instructions) Insurance Broker		Employer (See Instructions) Worldwide Facilities

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/3 Rpt: 11/45
<b>2</b> FILER NAME AFC Victory Fund		<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 12/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lonsdale Enterprises Inc.	<b>7</b> Amount of Contribution (\$) \$10,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Los Altos, CA 94024	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marshall Jr., E. Pierce	Amount of Contribution (\$) \$100,000.00
	Contributor address; City; State; Zip Code  Dallas, TX 75230	
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Elevage Capital Management
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Middleton, D. Mayes	Amount of Contribution (\$) \$100,000.00
	Contributor address; City; State; Zip Code  Wallisville, TX 77597	
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions) State of Texas
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Uihlein, Richard	Amount of Contribution (\$) \$1,000,000.00
	Contributor address; City; State; Zip Code  Lake Bluff, IL 60044	
Principal occupation / Job title (See Instructions) CEO/Owner		Employer (See Instructions) Uline
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weldon, Peter	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code  Winter Park, FL 32789	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/3 Rpt: 12/45
<b>2</b> FILER NAME AFC Victory Fund		<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wilkirson, Stacy	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77024	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/1 Rpt: 13/45	
2 FILER NAME AFC Victory Fund		3 Filer ID (Ethics Commission Filers) 00088032	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 01/22/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Abbott Campaign	8 Amount of contribution (\$) \$9,232.92	9 In-kind contribution description In kind-Data
	7 Contributor address; City; State; Zip Code  Austin, TX 78767	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/32 Rpt: 14/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
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<b>4</b> Date 01/11/2024	<b>5</b> Payee name Adams Leadership PAC
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<b>6</b> Amount (\$) \$5,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1523 E 1425 N  Layton, UT 84040
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Not TX Contribution
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/16/2024	Payee name Anedot
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Amount (\$) \$22.60  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras St Ste. 1770 New Orleans, LA 70112
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Processing
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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 01/17/2024	Payee name CP Strategies LLC
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Amount (\$) \$6,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1327 H ST Ste 303 Lincoln, NE 68508
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Strategic Consulting
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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.

<b>1</b> Total pages Schedule F1: Sch: 2/32 Rpt: 15/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/17/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$6,619.83  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Gary VanDeaver HD01
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought State Representative District 01
Date 01/17/2024	Payee name Camelback Strategy Group	
Amount (\$) \$8,193.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11
Date 01/17/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,054.86  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Ernest Bailes HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought State Representative District 11

# 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.

<b>1</b> Total pages Schedule F1: Sch: 3/32 Rpt: 16/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/17/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$5,882.23  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Justin Holland HD33
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought Office held State Representative District 33
Date 01/17/2024	Payee name Camelback Strategy Group	
Amount (\$) \$6,747.43  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose John Kuempel HD 44
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought Office held State Representative District 44
Date 01/17/2024	Payee name Camelback Strategy Group	
Amount (\$) \$4,292.18  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought Office held State Representative District 55



# 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.

<b>1</b> Total pages Schedule F1: Sch: 4/32 Rpt: 17/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/17/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$8,880.45  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose DeWayne Burns HD58
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought State Representative District 58
Date 01/17/2024	Payee name Camelback Strategy Group	
Amount (\$) \$14,039.05  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Glenn Rogers HD60
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought State Representative District 60
Date 01/17/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,726.85  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Reggie Smith HD 62
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62

# 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.

<b>1</b> Total pages Schedule F1: Sch: 5/32 Rpt: 18/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/17/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$7,181.85  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Stan Lambert HD71
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought Office held State Representative District 71
Date 01/17/2024	Payee name Camelback Strategy Group	
Amount (\$) \$6,692.74  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought Office held State Representative District 72
Date 01/17/2024	Payee name Camelback Strategy Group	
Amount (\$) \$5,701.77  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121

# 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.

<b>1</b> Total pages Schedule F1: Sch: 6/32 Rpt: 19/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/17/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$6,619.83  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Gary VanDeaver HD01
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought State Representative District 01
Date 01/17/2024	Payee name Camelback Strategy Group	
Amount (\$) \$8,193.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11
Date 01/17/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,054.86  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Ernest Bailes HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought State Representative District 18

# 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.

<b>1</b> Total pages Schedule F1: Sch: 7/32 Rpt: 20/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/17/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$5,882.23  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Justin Holland HD33
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought State Representative District 33
Date 01/17/2024	Payee name Camelback Strategy Group	
Amount (\$) \$6,747.43  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose John Kuempel HD44
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought State Representative District 44
Date 01/17/2024	Payee name Camelback Strategy Group	
Amount (\$) \$4,292.18  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought State Representative District 55

# 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.

<b>1</b> Total pages Schedule F1: Sch: 8/32 Rpt: 21/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/17/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$8,880.45  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose DeWayne Burns HD58
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought Office held State Representative District 58
Date 01/17/2024	Payee name Camelback Strategy Group	
Amount (\$) \$14,039.05  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Gelnn Rogers HD60
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought Office held State Representative District 60
Date 01/17/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,726.85  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Reggie Smith HD62
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought Office held State Representative District 62

# 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.

<b>1</b> Total pages Schedule F1: Sch: 9/32 Rpt: 22/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/17/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$7,181.85  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Stan Lambert HD71
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought Office held State Representative District 71
Date 01/17/2024	Payee name Camelback Strategy Group	
Amount (\$) \$6,692.74  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought Office held State Representative District 72
Date 01/17/2024	Payee name Camelback Strategy Group	
Amount (\$) \$5,701.77  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121

# 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.

<b>1</b> Total pages Schedule F1: Sch: 10/32 Rpt: 23/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/22/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$6,619.83  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Gary VanDeaver HD01
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought State Representative District 01
Date 01/22/2024	Payee name Camelback Strategy Group	
Amount (\$) \$8,193.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11
Date 01/22/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,054.86  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Ernest Bailes HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought State Representative District 18

# 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.

<b>1</b> Total pages Schedule F1: Sch: 11/32 Rpt: 24/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/22/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$5,882.23  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Justin Holland HD33
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought State Representative District 33
Date 01/22/2024	Payee name Camelback Strategy Group	
Amount (\$) \$6,747.42  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose John Kuempel HD44
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought State Representative District 44
Date 01/22/2024	Payee name Camelback Strategy Group	
Amount (\$) \$4,292.17  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought State Representative District 55



# 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.

<b>1</b> Total pages Schedule F1: Sch: 12/32 Rpt: 25/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/22/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$8,880.65  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose DeWayne Burns HD58
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought State Representative District 58
Date 01/22/2024	Payee name Camelback Strategy Group	
Amount (\$) \$14,039.05  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Glenn Rogers HD60
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought State Representative District 60
Date 01/22/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,726.85  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Reggie Smith HD62
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62

# 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.

<b>1</b> Total pages Schedule F1: Sch: 13/32 Rpt: 26/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/22/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$7,181.85  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Stan Lambert HD71
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought State Representative District 71
Date 01/22/2024	Payee name Camelback Strategy Group	
Amount (\$) \$6,692.74  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought State Representative District 72
Date 01/22/2024	Payee name Camelback Strategy Group	
Amount (\$) \$5,701.77  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Steve Allison HD121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought State Representative District 121

# 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.

<b>1</b> Total pages Schedule F1: Sch: 14/32 Rpt: 27/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/24/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$8,076.58  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Gary VanDeaver HD01
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought State Representative District 01
Date 01/24/2024	Payee name Camelback Strategy Group	
Amount (\$) \$9,719.49  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11
Date 01/24/2024	Payee name Camelback Strategy Group	
Amount (\$) \$8,150.10  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Ernest Bailes HD18
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought State Representative District 18

# 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.

<b>1</b> Total pages Schedule F1: Sch: 15/32 Rpt: 28/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/24/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$6,877.21  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Justin Holland HD33
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought State Representative District 33
Date 01/24/2024	Payee name Camelback Strategy Group	
Amount (\$) \$5,666.90  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose John Kuempel HD44
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought State Representative District 44
Date 01/24/2024	Payee name Camelback Strategy Group	
Amount (\$) \$4,906.20  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Hugh Shine HD55
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought State Representative District 55

# 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.

<b>1</b> Total pages Schedule F1: Sch: 16/32 Rpt: 29/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/24/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$7,347.48  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose DeWayne Burns HD58
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought State Representative District 58
Date 01/24/2024	Payee name Camelback Strategy Group	
Amount (\$) \$11,431.67  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Glenn Rogers HD60
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought State Representative District 60
Date 01/24/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,943.52  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Reggie Smith HD62
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62

# 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.

<b>1</b> Total pages Schedule F1: Sch: 17/32 Rpt: 30/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/24/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$7,699.27  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Stan Lambert HD71
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought State Representative District 71
Date 01/24/2024	Payee name Camelback Strategy Group	
Amount (\$) \$7,750.31  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought State Representative District 72
Date 01/24/2024	Payee name Camelback Strategy Group	
Amount (\$) \$6,787.90  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Steve Allison HD 121
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought State Representative District 121

# 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.

<b>1</b> Total pages Schedule F1: Sch: 18/32 Rpt: 31/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/24/2024	<b>5</b> Payee name Camelback Strategy Group	
<b>6</b> Amount (\$) \$4,468.98  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2801 E Camelback Rd Ste 200 Phoenix, AZ 85016	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Direct Mail Oppose Charlie Geren HD99
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Geren, Charlie	Office sought State Representative District 99
Date 01/11/2024	Payee name Candice Pierucci for House District 52	
Amount (\$) \$1,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13457 S Corbin Valley Dr.  Riverton, UT 84096	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non TX Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 01/11/2024	Payee name Committee to Elect Kirk Cullimore	
Amount (\$) \$1,500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1685  Draper, UT 84020	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non TX Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

# 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.

<b>1</b> Total pages Schedule F1: Sch: 19/32 Rpt: 32/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
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<b>4</b> Date 01/11/2024	<b>5</b> Payee name Committee to Elect Lincoln Fillmore
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<b>6</b> Amount (\$) \$1,500.00	<b>7</b> Payee address; City; State; Zip Code 10167 South 1190 West  South Jordan, UT 84095
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non TX Contribution
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/17/2024	Payee name Cygnal
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Amount (\$) \$162,518.76	Payee address; City; State; Zip Code 90017th St NW Ste 950 Washington, DC 20006
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Expenditure from corporate funds

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research
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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 01/17/2024	Payee name Cygnal
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Amount (\$) \$20,333.43	Payee address; City; State; Zip Code 90017th St NW Ste 950 Washington, DC 20006
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Expenditure from corporate funds

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research
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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.

<b>1</b> Total pages Schedule F1: Sch: 20/32 Rpt: 33/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/17/2024	<b>5</b> Payee name Drogin Group	
<b>6</b> Amount (\$) \$18,500.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 6705 W Hwy 290 Ste 50281 Austin, TX 50281	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Strategic Consulting
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought State Representative District 01
Date 01/24/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,983.33  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051 Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Ads Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office held State Representative District 01
Date 01/24/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,983.33  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051 Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Ads Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office held State Representative District 11

# 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.

<b>1</b> Total pages Schedule F1: Sch: 21/32 Rpt: 34/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/24/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$1,983.33  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Ads Oppose Ernest Bailes HD18
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought Office held State Representative District 18
Date 01/24/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,983.33  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Ads Oppose Justin Holland HD33
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought Office held State Representative District 33
Date 01/24/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,983.33  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Ads Oppose John Kuempel HD44
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, John	Office sought Office held State Representative District 44

# 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.

<b>1</b> Total pages Schedule F1: Sch: 22/32 Rpt: 35/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/24/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$1,983.33  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Ads Oppose Hugh Shine HD55
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought Office held State Representative District 55
Date 01/24/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,983.33  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Ads Oppose DeWayne Burns HD58
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought Office held State Representative District 58
Date 01/24/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,983.33  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Ads Oppose Glenn Rogers HD60
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought Office held State Representative District 60

# 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.

<b>1</b> Total pages Schedule F1: Sch: 23/32 Rpt: 36/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/24/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$1,983.33  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Ads Oppose Reggie Smith HD62
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62
Date 01/24/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,983.33  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Ads Oppose Stan Lambert HD71
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lamber, Stan	Office sought State Representative District 71
Date 01/24/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,983.33  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Ads Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought State Representative District 72

# 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.

<b>1</b> Total pages Schedule F1: Sch: 24/32 Rpt: 37/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/24/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$1,983.33  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Ads Oppose Steve Allison HD121
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought Office held State Representative District 121
Date 01/24/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,983.33  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Ads Oppose Keith Bell HD04
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bell, Keith	Office sought Office held State Representative District 04
Date 01/24/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$1,983.33  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Ads Oppose Ken King HD88
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name King, Ken	Office sought Office held State Representative District 88

# 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.

<b>1</b> Total pages Schedule F1: Sch: 25/32 Rpt: 38/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/24/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$1,983.33  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Ads Oppose Charlie Geren HD99
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Geren, Charlie	Office sought State Representative District 99
Date 01/25/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$5,936.22  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Media Oppose Gary VanDeaver HD01
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name VanDeaver, Gary	Office sought State Representative District 01
Date 01/25/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$6,097.86  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Media Oppose Travis Clardy HD11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clardy, Travis	Office sought State Representative District 11

# 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.

<b>1</b> Total pages Schedule F1: Sch: 26/32 Rpt: 39/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/25/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$5,938.92  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Media Oppose Ernest Bailes HD18
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bailes, Ernest	Office sought Office held State Representative District 18
Date 01/25/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$5,206.86  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Media Oppose Justin Holland HD33
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Holland, Justin	Office sought Office held State Representative District 33
Date 01/25/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$4,842.72  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Media Oppose John Kuempel HD44
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kuempel, Justin	Office sought Office held State Representative District 44

# 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.

<b>1</b> Total pages Schedule F1: Sch: 27/32 Rpt: 40/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/25/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$3,457.80  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Media Oppose Hugh Shine HD55
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Shine, Hugh	Office sought State Representative District 55
Date 01/25/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$5,694.30  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Media Oppose DeWayne Burns HD58
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Burns, DeWayne	Office sought State Representative District 58
Date 01/25/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$8,080.38  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Media Oppose Glenn Rogers HD60
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Rogers, Glenn	Office sought State Representative District 60



# 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.

<b>1</b> Total pages Schedule F1: Sch: 28/32 Rpt: 41/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/25/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$6,514.02  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Media Oppose Reggie Smith HD62
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Smith, Reggie	Office sought State Representative District 62
Date 01/25/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$5,179.68  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Media Oppose Stan Lambert HD71
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lambert, Stan	Office sought State Representative District 71
Date 01/25/2024	Payee name Flexpoint Media Inc	
Amount (\$) \$5,157.90  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Media Oppose Drew Darby HD72
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew	Office sought State Representative District 72

# 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.

<b>1</b> Total pages Schedule F1: Sch: 29/32 Rpt: 42/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
<b>4</b> Date 01/25/2024	<b>5</b> Payee name Flexpoint Media Inc	
<b>6</b> Amount (\$) \$5,000.40  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1051  Albany, OH 43054	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IE-Digital Media Oppose Steve Allison HD121
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Allison, Steve	Office sought State Representative District 121
Date 01/05/2024	Payee name Fulcrum Research LLC	
Amount (\$) \$5,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 611 Commerce St Ste 2704 Nashville, TN 37203	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2024	Payee name Fulcrum Research LLC	
Amount (\$) \$15,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 611 Commerce St Ste 2704 Nashville, TN 37203	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research
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.

<b>1</b> Total pages Schedule F1: Sch: 30/32 Rpt: 43/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
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<b>4</b> Date 01/24/2024	<b>5</b> Payee name Gober Group PLLC
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<b>6</b> Amount (\$) \$2,730.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 341016  Austin, TX 78734
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Legal Services	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal Fees
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/28/2023	Payee name Huckaby Davis Lisker
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Amount (\$) \$3,396.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 228 S Washington St Ste 115 Alexandria, VA 22314
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance Consulting
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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 01/25/2024	Payee name MB Public Affairs Inc
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Amount (\$) \$30,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1415 L ST #1260  Sacramento, CA 95814
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research
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Complete ONLY 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.

<b>1</b> Total pages Schedule F1: Sch: 31/32 Rpt: 44/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
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<b>4</b> Date 01/05/2024	<b>5</b> Payee name Percipient Strategies
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<b>6</b> Amount (\$) \$15,500.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 71613  Washington, DC 20024
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/22/2024	Payee name Percipient Strategies
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Amount (\$) \$10,300.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 71613  Washington, DC 20024
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research
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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 01/11/2024	Payee name Utah House Republican Committee
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Amount (\$) \$5,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 420 East South Temple Suite 390 Salt Lake City, UT 84111
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Non TX 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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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |                                                                                  |                               |                                |                                            |
|----------------------------------------------------------------------------------|-------------------------------|--------------------------------|--------------------------------------------|
| 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 -<br>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.

<b>1</b> Total pages Schedule F1: Sch: 32/32 Rpt: 45/45	<b>2</b> FILER NAME AFC Victory Fund	<b>3</b> Filer ID (Ethics Commission Filers) 00088032
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<b>4</b> Date 01/04/2024	<b>5</b> Payee name Vantage ROI
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<b>6</b> Amount (\$) \$9,750.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 340836  Austin, TX 78734
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/22/2024	Payee name Vantage ROI
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Amount (\$) \$9,893.50  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 340836  Austin, TX 78734
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Research
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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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