

DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

**FORM DCE
COVER SHEET PG 1**

The DCE Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00080699	2 Total pages filed: 12
3 FILER NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
		Gun Owners of America, Inc.	
4 FILER ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
	c/o Walter J. Olson 370 Maple Avenue West, Suite 4 Vienna, VA 22180-5615		
5 FILER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
		(703) 356-6919	
6 REPORT TYPE	<input type="checkbox"/> January 15		<input type="checkbox"/> 30th day before election
	<input type="checkbox"/> July 15		<input type="checkbox"/> 8th day before election
			<input checked="" type="checkbox"/> Runoff
7 PERIOD COVERED	Month	Day	Year
		03/02/2024	THROUGH
		05/18/2024	
8 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
		05/28/2024	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
9 FILER ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)		A. Supported Cheryl Bean State Representative
			B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)		A. Supported
			B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

OFFICE USE ONLY	
Date Received	
ELECTRONICALLY FILED 05/20/2024	
Date Hand-delivered or Date Postmarked	
Receipt #	Amount
Date Processed	
Date Imaged	

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**DIRECT CAMPAIGN EXPENDITURES
CAMPAIGN FINANCE REPORT**

**FORM DCE
COVER SHEET PG 2**

10 FILER NAME Gun Owners of America, Inc.		11 Filer ID (Ethics Commission Filers) 00080699
12 EXPENDITURE TOTALS	1. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	2. TOTAL POLITICAL EXPENDITURES	\$ 19,039.45

13 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.

Signature of Filer
or
Signature of individual with authority to sign on behalf of entity
(only if Filer is an entity)

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

DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

FORM **DCE**
ADDENDUM

Page 3 of 12

10 FILER NAME Gun Owners of America, Inc.		11 Filer ID (Ethics Commission Filers) 00080699
12 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates <small>(identify by name or, if applicable, classify by party)</small>	A. Supported David Covey State Representative B. Opposed
	2. Measures <small>(describe by date and location of election and nature of issue)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(identify by name or, if applicable, classify by party)</small>	
	1. Candidates <small>(identify by name or, if applicable, classify by party)</small>	A. Supported Andy Hopper State Representative B. Opposed
	2. Measures <small>(describe by date and location of election and nature of issue)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(identify by name or, if applicable, classify by party)</small>	
12 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates <small>(identify by name or, if applicable, classify by party)</small>	A. Supported Helen Kerwin State Representative B. Opposed
	2. Measures <small>(describe by date and location of election and nature of issue)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(identify by name or, if applicable, classify by party)</small>	

DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

FORM **DCE**
ADDENDUM

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10 FILER NAME Gun Owners of America, Inc.		11 Filer ID (Ethics Commission Filers) 00080699
12 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (identify by name or, if applicable, classify by party)	A. Supported AJ Louderback State Representative B. Opposed
	2. Measures (describe by date and location of election and nature of issue)	A. Supported B. Opposed
	3. Officeholders Assisted (identify by name or, if applicable, classify by party)	
	1. Candidates (identify by name or, if applicable, classify by party)	A. Supported David Lowe State Representative B. Opposed
	2. Measures (describe by date and location of election and nature of issue)	A. Supported B. Opposed
	3. Officeholders Assisted (identify by name or, if applicable, classify by party)	
12 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (identify by name or, if applicable, classify by party)	A. Supported Katrina Pierson State Representative B. Opposed
	2. Measures (describe by date and location of election and nature of issue)	A. Supported B. Opposed
	3. Officeholders Assisted (identify by name or, if applicable, classify by party)	

DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

FORM **DCE**
ADDENDUM

Page 5 of 12

10 FILER NAME Gun Owners of America, Inc.		11 Filer ID (Ethics Commission Filers) 00080699
12 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (identify by name or, if applicable, classify by party)	A. Supported Alan Schoolcraft State Representative
		B. Opposed
	2. Measures (describe by date and location of election and nature of issue)	A. Supported
		B. Opposed
	3. Officeholders Assisted (identify by name or, if applicable, classify by party)	

SUBTOTALS - DCE

FORM DCE
COVER SHEET PG 3
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14 FILER NAME Gun Owners of America, Inc.		15 Filer ID (Ethics Commission Filers) 00080699
16 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES	\$ 19,039.45
2.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
3.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$

POLITICAL EXPENDITURES

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 -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/6 Rpt: 7/12	2 FILER NAME Gun Owners of America, Inc.	3 Filer ID (Ethics Commission Filers) 00080699
4 Date 05/13/2024	5 Payee name 3Di Sign & Design, Inc.	
6 Amount (\$) \$879.93	7 Payee address; City; State; Zip Code 1133 W. Main Street Arlington, TX 76013	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 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. Bus signage for May 15-17 bus tour
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bean, Cheryl	Office sought State Representative District 97
Date 05/13/2024	Payee name 3Di Sign & Design, Inc.	
Amount (\$) \$879.93	Payee address; City; State; Zip Code 1133 W. Main Street Arlington, TX 76013	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
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. Bus signage for May 15-17 bus tour
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Covey, David	Office sought State Representative District 21
Date 05/13/2024	Payee name 3Di Sign & Design, Inc.	
Amount (\$) \$879.93	Payee address; City; State; Zip Code 1133 W. Main Street Arlington, TX 76013	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
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. Bus signage for May 15-17 bus tour
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Hopper, Andy	Office sought State Representative District 64

POLITICAL EXPENDITURES

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/6 Rpt: 8/12	2 FILER NAME Gun Owners of America, Inc.	3 Filer ID (Ethics Commission Filers) 00080699
4 Date 05/13/2024	5 Payee name 3Di Sign & Design, Inc.	
6 Amount (\$) \$879.93	7 Payee address; City; State; Zip Code 1133 W. Main Street Arlington, TX 76013	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 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. Bus signage for May 15-17 bus tour
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Kerwin, Helen State Representative District 58	
Date 05/13/2024	Payee name 3Di Sign & Design, Inc.	
Amount (\$) \$879.93	Payee address; City; State; Zip Code 1133 W. Main Street Arlington, TX 76013	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
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. Bus signage for May 15-17 bus tour
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Louderback, AJ State Representative District 30	
Date 05/13/2024	Payee name 3Di Sign & Design, Inc.	
Amount (\$) \$879.93	Payee address; City; State; Zip Code 1133 W. Main Street Arlington, TX 76013	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
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. Bus signage for May 15-17 bus tour
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Lowe, David State Representative District 91	

POLITICAL EXPENDITURES

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/6 Rpt: 9/12	2 FILER NAME Gun Owners of America, Inc.	3 Filer ID (Ethics Commission Filers) 00080699
4 Date 05/13/2024	5 Payee name 3Di Sign & Design, Inc.	
6 Amount (\$) \$879.93	7 Payee address; City; State; Zip Code 1133 W. Main Street Arlington, TX 76013	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 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. Bus signage for May 15-17 bus tour
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Pierson, Katrina	Office sought State Representative District 33
Date 05/13/2024	Payee name 3Di Sign & Design, Inc.	
Amount (\$) \$879.94	Payee address; City; State; Zip Code 1133 W. Main Street Arlington, TX 76013	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
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. Bus signage for May 15-17 bus tour
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Schoolcraft, Alan	Office sought State Representative District 44
Date 05/01/2024	Payee name Big Tex Bus LLC	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code P.O. Box 1900 Mansfield, TX 76063	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
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. Bus rental for May 15-17 bus tour
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Bean, Cheryl	Office sought State Representative District 97

POLITICAL EXPENDITURES

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/6 Rpt: 10/12	2 FILER NAME Gun Owners of America, Inc.	3 Filer ID (Ethics Commission Filers) 00080699
4 Date 05/01/2024	5 Payee name Big Tex Bus LLC	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code P.O. Box 1900 Mansfield, TX 76063	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 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. Bus rental for May 15-17 bus tour
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
	Candidate/Officeholder name Covey, David	Office sought State Representative District 21
	Office held	
Date 05/01/2024	Payee name Big Tex Bus LLC	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code P.O. Box 1900 Mansfield, TX 76063	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
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. Bus rental for May 15-17 bus tour
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
	Candidate/Officeholder name Hopper, Andy	Office sought State Representative District 64
	Office held	
Date 05/01/2024	Payee name Big Tex Bus LLC	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code P.O. Box 1900 Mansfield, TX 76063	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
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. Bus rental for May 15-17 bus tour
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
	Candidate/Officeholder name Kerwin, Helen	Office sought State Representative District 58
	Office held	

POLITICAL EXPENDITURES

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/6 Rpt: 11/12	2 FILER NAME Gun Owners of America, Inc.	3 Filer ID (Ethics Commission Filers) 00080699
4 Date 05/01/2024	5 Payee name Big Tex Bus LLC	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code P.O. Box 1900 Mansfield, TX 76063	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 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. Bus rental for May 15-17 bus tour
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Louderback, AJ	Office sought State Representative District 30
Date 05/01/2024	Payee name Big Tex Bus LLC	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code P.O. Box 1900 Mansfield, TX 76063	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
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. Bus rental for May 15-17 bus tour
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Lowe, David	Office sought State Representative District 91
Date 05/01/2024	Payee name Big Tex Bus LLC	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code P.O. Box 1900 Mansfield, TX 76063	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
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. Bus rental for May 15-17 bus tour
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Pierson, Katrina	Office sought State Representative District 33

POLITICAL EXPENDITURES

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 -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/6 Rpt: 12/12	2 FILER NAME Gun Owners of America, Inc.	3 Filer ID (Ethics Commission Filers) 00080699
4 Date 05/01/2024	5 Payee name Big Tex Bus LLC	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code P.O. Box 1900 Mansfield, TX 76063	
<input checked="" type="checkbox"/> Expenditure from corporate funds	(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. Bus rental for May 15-17 bus tour
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Schoolcraft, Alan	Office sought State Representative District 44
Office held		