FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00088727 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Defense PAC Date Received **ELECTRONICALLY FILED** 07/15/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1512 Huckleberry Lane Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78749 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Spencer NAME NICKNAME LAST **SUFFIX** Davis STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1512 Huckleberry Lane STREET **ADDRESS** (Residence or Business) Austin, TX 78749 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1512 Huckleberry Lane MAILING **ADDRESS** Austin, TX 78749 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 788-1605 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 05/19/2024 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texas Defense PAC			00088727	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported The Honorable Matthew M. Ph	nelan State Re	epresentative
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed		
	3. Officeholders			
	Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS,CONTRIBUTIONS M	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	139.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	1,025,904.24
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	4,765,607.12
OUTSTANDING LOAN TOTALS	l .	AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	<u> </u>			
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Spend	cer Davis	
		Signature of Ca	ampaign Treasur	rer
AFFIX NOTAR	Y STAMP / SEAL ABOVE			
Sworn to and subscribe	d before me, by the said	, t	this the	day
		which, witness my hand and seal of office.		-
Signature of officer a	dministering oath	Printed name of officer administering oath	Title of offic	er administering oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

Page 3 of 15

				1 ago o o 1 10
12 COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Texas Defense PAC				00088727
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Frederick E. Fra.	zier State Representative
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE	1. Candidates	A. Supported	The Honorable Justin A. Holland	State Representative
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	The Honorable John L. Kuempe	State Representative
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

Page 4 of 15

						1 ago 1 01 10
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Defense PAC					00088727	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		John W. McQueeney	State Rep	resentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE	1. Candidates	A. Supported				
ACTIVITY	(Identify by name or, if applicable, classify by party.)					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	David Covey State Ro	epresentati	ve	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	Cheryl Bean State Re	epresentati	ve	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	•	•				

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

			5 of 15
17 COMMITTEE N		18 Filer ID 00088727	(Ethics Commission Filers)
19 SCHEDULE SI NAME OF SCH	SUBTOTAL AMOUNT		
1. So	CHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2. S0	CHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. So	CHEDULE B: PLEDGED CONTRIBUTIONS		\$
	CHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO RGANIZATION	R	\$
	CHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA ABOR ORGANIZATION	TION OR	\$
6. S	CHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA	ANIZATION	\$
	CHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR RGANIZATION		\$
8. Sc	CHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	ORGANIZATION	\$
9. Sc	CHEDULE E: LOANS		\$
10. X S0	CHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$ 1,022,961.74
11. X S0	CHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 2,942.50
12. S	CHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$
13. S	CHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14. S	CHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
	CHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F O FILER	RETURNED	\$
I			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	al Co	ommittee	Legal Services The Instruction	n Guide explains			Contract Labor		OTHER (enter	a category not	listed above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics C	ommission Filers)
	Sch: 1/9 Rpt: 6/15		Texas Defe	nse PAC						00088727		
4	Date	5	Payee name									
	05/30/2024		American A	irlines								
6	Amount (\$) \$534.45	7	Payee addre	-	State	e; Zip Co	de					
	Expenditure from corporate funds		Fort Worth,	TX 76155								
8	PURPOSE	(a)	Category (Se	ee Categories listed	at the top of this so	chedule)	(b)	Description				
	OF EXPENDITURE		Travel In Di	strict				_	, TX	ide of Texas. Cor , officeholder livir travel		ıle T.
_	Complete ONLY if direct	Ц,	Candidata/Offi	aahaldar nama		Office cour	abt			Office h	old	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Oiii	ceholder name	,	Office sou	gnı			Office r	leia	
	Date		Payee name									
	05/21/2024		Beacon Stra	ategies LLC								
	Amount (\$)	T	Payee addre	ss; City;	State	e; Zip Co	de					
	\$97,507.50		1512 Huckl	eberry Ln								
	Expenditure from corporate funds		Austin, TX	78748								
	PURPOSE	(a)	Category (Se	ee Categories listed	at the top of this so	chedule)	(b)	Description				
	OF EXPENDITURE		Advertising	Expense				□		ide of Texas. Cor		ıle T.
								In-kind: Camp		, officeholder livir		
								iii-kiiiu. Caiiij	pai	gii iiieula a	avertising	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	?	Office sou	ght			Office h	eld	
	Date		Payee name									
	05/21/2024		Beacon Stra	ategies LLC								
	Amount (\$)		Payee addre	ss; City;	State	e; Zip Co	de					
	\$23,756.25		1512 Huckl			•						
	Expenditure from corporate funds		Austin, TX	78748								
	PURPOSE	(a)	Category (Se	ee Categories listed	at the top of this so	chedule)	(b)	Description				
	OF EXPENDITURE		Advertising	Expense						ide of Texas. Cor		ıle T.
								In-kind: Cam		, officeholder livir gn canvass		es
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name		Office sou	ght			Office h	eld	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/9 Rpt: 7/15	Texas Defense PAC 00088727
4 Date	5 Payee name
05/21/2024	Beacon Strategies LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$215,162.10	1512 Huckleberry Ln
Expenditure from corporate funds	Austin, TX 78748
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	☐ Check if Austin, TX, officeholder living expense In-kind: Campaign mail advertising
	in-Aird. Campaign mail advertising
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
05/21/2024	Beacon Strategies LLC
Amount (\$)	Payee address; City; State; Zip Code
\$181,858.13	1512 Huckleberry Ln
Expenditure from corporate funds	Austin, TX 78748
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In-kind: Campaign texting services
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
05/28/2024	Beacon Strategies LLC
Amount (\$)	Payee address; City; State; Zip Code
\$3,255.47	1512 Huckleberry Ln
,	
Expenditure from corporate funds	Austin, TX 78748
-	,
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In-kind: Campaign live calls
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	• • • • • • • • • • • • • • • • • • •

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Comp

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Tatal marian Calcadida F1.	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1:	
Sch: 3/9 Rpt: 8/15	Texas Defense PAC 00088727
4 Date	5 Payee name
05/28/2024	Beacon Strategies LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$11,000.00	1512 Huckleberry Ln
- Cynonditure from	
Expenditure from corporate funds	Austin, TX 78748
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	/ / / · · · · · · · · · · · · · · · · ·
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In-kind: Campaign digital advertising
O Committee ONLY if allowed	On all data (Office had don grown
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to belieff of of	
Date	Payee name
05/28/2024	Beacon Strategies LLC
Amount (\$)	
Amount (\$)	
\$9,179.90	1512 Huckleberry Ln
- Funanditura from	
Expenditure from corporate funds	Austin, TX 78748
PURPOSE	(a) Cotagon. (b) Deceription
OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In-kind: Campaign texting services
	and the second s
Operation ONLY if direct	Our stide to 10 ff as had don marries Off as a south to
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to belieff Great	
Date	Payee name
05/28/2024	Beacon Strategies LLC
	-
Amount (\$)	
\$3,018.75	1512 Huckleberry Ln
Expenditure from	
corporate funds	Austin, TX 78748
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In-kind: Campaign canvassing services
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
3p 223 to 20 0/0/	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/9 Rpt: 9/15	Texas Defense PAC 00088727
4 Date	5 Payee name
06/24/2024	Camelback Strategy Group
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$14,345.75	2141 E Highland Ave, Ste A105
Expenditure from	Dhooniy A7 95016
corporate funds	Phoenix, AZ 85016
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In-kind: Campaign door canvassing serivces
	in tails. Sampaigh door samsasing somess
Complete CNI V if direct	Candidate/Officeholder name Office sought Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	
Date	Payee name
05/24/2024	CampaignHQ
Amount (\$)	Payee address; City; State; Zip Code
\$6,030.00	PO Box 257
Expenditure from corporate funds	Brooklyn, IA 52211
<u>'</u>	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In-kind: Campaign live calls
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
05/24/2024	CampaignHQ
Amount (\$)	Payee address; City; State; Zip Code
\$12,638.58	PO Box 257
Expenditure from corporate funds	Brooklyn, IA 52211
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expanse (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In-kind: Campaign live calls
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	•

SCHEDULE F1

Advertising Expense Et Accounting/Banking Fe Consulting Expense Fe Contributions/ Donations Made By - G Candidate/Officeholder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/9 Rpt: 10/15	Texas Defense PAC	00088727
4 Date	5 Payee name	
05/28/2024	CampaignHQ	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$3,034.55	PO Box 257	
Expenditure from corporate funds	Brooklyn, IA 52211	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense In-kind: Campaign live calls
		iii kiid. Campaigii iive caiis
Complete ONLY if direct	Candidate/Officeholder name Office co.	aht Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	gnt Office field
Date	Payee name	
05/21/2024	Cates Legal Group PLLC	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$10,000.00	20210 Silver Stream	
Expenditure from corporate funds	San Antonio, TX 78259	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Legal Services	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		PAC legal services
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
experiulture to beliefft C/OI	1	
Date	Payee name	
06/24/2024	Frederick Bookkeeping	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$1,500.00	PO Box 1696	
, ,		
Expenditure from corporate funds	Liberty Hill, TX 78642	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	, 1000anang, 2amang	Check if Austin, TX, officeholder living expense
		PAC accounting services
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI	1	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/9 Rpt: 11/15	Texas Defense PAC 00088727
4 Date	5 Payee name
05/29/2024	JW Marriott Austin
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$672.17	110 E 2nd St
- Funanditura from	
Expenditure from corporate funds	Austin, TX 78701
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense PAC consultant lodging
	TAC Consultant loughly
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/04/2024	Nasica Tactical
Amount (\$)	Payee address; City; State; Zip Code
\$20,125.00	PO Box 871
Expenditure from corporate funds	Austin, TX 78767
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In-kind: Campaign canvassing services
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/01	
Date	Payee name
05/21/2024	PT Strategy LLC
Amount (\$)	Payee address; City; State; Zip Code
\$22,750.00	1223 Aldebaran Dr
- "	
Expenditure from corporate funds	McLean, VA 22101
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	In-kind: Campaign advertising design services
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 7/9 Rpt: 12/15	Texas Defense PAC 00088727
4 Date	5 Payee name
05/24/2024	Spectrum Marketing Companies
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$7,287.27	95 Eddy Rd, Ste 101
Expenditure from corporate funds	Manchester, NH 03102
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	In-kind: Campaign door canvassing materials
O Committee ONII V if discret	Candidate/Officeholder name Office sought Office held
Complete ONLY if direct expenditure to benefit C/OF	
Date	Payee name
05/24/2024	Spectrum Marketing Companies
Amount (\$)	Payee address; City; State; Zip Code
\$8,211.36	95 Eddy Rd, Ste 101
Expenditure from corporate funds	Manchester, NH 03102
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In-kind: Campaign door canvassing materials
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/03/2024	Sullivan Advertising & Design
Amount (\$)	Payee address; City; State; Zip Code
\$5,506.21	PO Box 1058
Expenditure from corporate funds	Port Neches, TX 77651
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense Advertising Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	In-kind: Campaign mail advertising
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
g Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/9 Rpt: 13/15	Texas Defense PAC 00088727
4 Date	5 Payee name
05/20/2024	Thomas Graphics Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$116,715.80	PO Box 142226
Expenditure from	
corporate funds	Austin, TX 78714-2226
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense In-kind: Campaign mailers
	iii kiid. Campaigii maiicis
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
05/21/2024	Thomas Graphics Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$58,537.90	PO Box 142226
Expenditure from corporate funds	Austin, TX 78714-2226
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	In-kind: Campaign mailers
	in think sampag. Thanks
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/13/2024	Thomas Graphics Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$58,357.90	PO Box 142226
·	
Expenditure from corporate funds	Austin, TX 78714-2226
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense
	☐ Check if Austin, TX, officeholder living expense In-kind: Campaign mailers
	III-Milu. Campaigh mailers
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		g Expense Fravel Out or District serWages/Contract Labor OTHER (enter a category not listed above)
		-
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 9/9 Rpt: 14/15	Texas Defense PAC	00088727
4 Date 5 Payee name		
05/20/2024	US Post Office	
6 Amount (\$)	7 Payee address; City; State; Zip	Code
\$131,837.70	8225 Cross Park Drive	
Expenditure from	Austin TV 70710	
corporate funds	Austin, TX 78710	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Printing Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		In-kind: Campaign mailer postage
9 Complete ONLY if direct	Candidate/Officeholder name Office s	sought Office held
expenditure to benefit C/O		ought Office field

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 15/15 Texas Defense PAC 00088727 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 06/26/2024 Atchley & Associates LLP Amount (\$) Payee address; State; Zip Code \$2,942.50 1005 La Posada Dr Expenditure from Austin, TX 78752 corporate funds TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense PAC accounting & reporting services 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH