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) 00064956 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Consumer Lenders PAC Date Received **ELECTRONICALLY FILED** 10/02/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 8801 Ambassador Row Date Hand-delivered or Date Postmarked Change of Address Dallas, TX 75247 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. C. Dan NAME NICKNAME LAST **SUFFIX** Adams STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 8801 Ambassador Row STREET **ADDRESS** (Residence or Business) Dallas, TX 75247 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 84 Villa Road MAILING **ADDRESS** Greenville, SC 29615 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (864) 672-8400 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) X **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff Year 10 PERIOD Month Day Year Day Month **COVERED THROUGH** 07/01/2024 10/07/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

2 COMMITTEE NAME			13 Filer ID (Ethics Commission Filers)		
Texas Consumer Lend	ers PAC		00064956		
14 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			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Sen. Angela Paxton State Ser	nator		
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00	
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	35,000.00	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00	
	4. TOTAL POLITICA	L EXPENDITURES	\$	46,000.00	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	77.12	
OUTSTANDING LOAN TOTALS	•	AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00	
16 AFFIDAVIT					
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.			
		Mr. C. Di	an Adams		
		Signature of Cal		rer	
AFFIX NOTARY	' STAMP / SEAL ABOVE				
Sworn to and subscribed	I before me, by the said	, tł	nis the	day	
		which, witness my hand and seal of office.			
Signature of officer ac	lministering oath	Printed name of officer administering oath	Title of offic	er administering oath	

FORM GPAC ADDENDUM

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						Fage 3 01 23
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texas Consumer Lende	ers PAC			00064956	
	COMMITTEE ACTIVITY	1. 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			
		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.)		Rep. Angela Orr State Represer	ntative	
	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			
		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.)		Rep. Ann Hernandez State Rep	resentative	
	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			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Solman Bhojani State Rep	resentative	

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					Fage 4 01 23
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Consumer Lende	ers PAC			00064956	
14 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			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Briscoe Cain State Repres	sentative	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rep. Caroline Fairly State Repr	esentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	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			
	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.)		Sen. Cesar Blanco State Senato	or	
	Assisted (Identify by name or, if		Sen. Cesar Blanco State Senato	or	

FORM GPAC ADDENDUM

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						Fage 3 01 23
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texas Consumer Lende	ers PAC			00064956	
	COMMITTEE ACTIVITY	1. 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			
		Measures (Describe by date and location of election and	A. Supported			
		nature of issue.)				
			B. Opposed			
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Sen. Charles Schwertner State	Senator	
	COMMITTEE	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			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders Assisted (Identify by name or, if)		Sen. Chuy Hinojosa State Sena	tor	
		applicable, classify by party.)				
	COMMITTEE ACTIVITY	1. 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			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		Officeholders Assisted (Identify by name or, if		Rep. Cody Harris State Represe	entative	
		applicable, classify by party.)				

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texas Consumer Lende	ers PAC			00064956	
	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			
		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.)		Rep. David Cook State Represe	entative	
	COMMITTEE	1. Candidates	A Supported			
	ACTIVITY		A. Supported			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(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			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Sen. Donna Campbell State Ser	nator	
	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			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Giovanni Capriglione State	e Representativ	e

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texas Consumer Lende	ers PAC			00064956	
	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			
		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.)		Rep. Hubert Vo State Represen	tative	
	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			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Jared Patterson State Rep	presentative	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Rep. John McQueeney State Re	epresentative	
	(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.)				
			•			

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Consumer Lende	ers PAC			00064956	
14 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			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Sen. Morgan LaMantia State So	enator	
COMMITTEE	1. Candidates	A. Supported	Rep. Pat Curry State Represen	tative	
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			
	3. 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			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Sen. Phil King State Senator		
	Assisted (Identify by name or, if		Sen. Phil King State Senator		

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						1 age 0 01 20
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texas Consumer Lende	ers PAC			00064956	
	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			
		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.)		Rep. Sam Harless State Repres	sentative	
	COMMITTEE	1. Candidates	A. Supported			
	ACTIVITY		A. Supported			
	ACTIVITI	(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			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Sen. Tan Parker State Senator		
	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			
		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.)		Rep. Terri Leo Wilson State Rep	presentative	
			-			

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texas Consumer Lende	ers PAC			00064956	
	COMMITTEE ACTIVITY	1. 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			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Toni Rose State Represen	tative	
	COMMITTEE	1. Candidates	A. Supported	Rep. Trey Wharton State Repre	sentative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Top. 110, marton class repre		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted				
		(Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rep. Wes Virdell State Represe	ntative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		Officeholders Assisted (Identify by name or, if				
		applicable, classify by party.)				

GENERAL-PURPOSE COMMITTEE REPORT:

FORM GPAC ADDENDUM

			Page 11 of 23
COMMITTEE NAME			13 Filer ID (Ethics Commission Filers)
Texas Consumer Lende	ers PAC		00064956
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Sen. Brent Hagenbuck State	Senator
(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	
	Officeholders Assisted		
	(Identify by name or, if applicable, classify by party.)		

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

				12 of 23	
17 COMMITTE	(Ethics Commission	n Filers)			
Texas Co	nsumer Lenders PAC	00064956			
19 SCHEDUL NAME OF	SUBTOTAL A	MOUNT			
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	35,000.00	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$		
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION)R	\$		
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$		
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$		
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	!	\$		
8.	8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION				
9.	\$				
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	46,000.00	
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$		
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$		
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$		

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1	
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 13/23
2	FILER NAME Texas Consumer Lenders PAC				Filer ID (Ethics Commission Filers) 00064956
4	Date 09/09/2024			7	Amount of Contribution (\$) \$9,500.00
_	Daine in all a second	Greenville, SC 29615	O Frankrije (Ostalastica)		
8	Principal occu President	ipal occupation / Job title (See Instructions) 9 Employer (See Instructions) The Capital Corporation			
	Date Full name of contributor out-of-state PAC (ID#:) 10/01/2024 Adams, C Dan (Mr.) Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$5,000.00
		Greenville, SC 29615			
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions The Capital Corporation		
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_ Brunner, PrisicIla Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$10,250.00
		Dayton, OH 45419			
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions DRKE LLC)	
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_Schear, Lee Contributor address; City; State; Zip Code Dayton, OH 45419)		Amount of Contribution (\$) \$10,250.00
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions Schear Financial Service		

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/10 Rpt: 14/23	Texas Consumer Lenders PAC 00064956
4 Date	5 Payee name
09/09/2024	Angela Paxton Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	P.O. Box 2878
Expenditure from corporate funds	McKinney, TX 75070
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Political Contribution
Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
09/09/2024	Angelia Orr for Texas House
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 113
Expenditure from corporate funds	Itasca, TX 76055
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	1 Silded Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
09/09/2024	Ann Hernandez Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 15538
- Evpanditura from	
Expenditure from corporate funds	Houston, TX 77220
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Folitical Continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

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:	
Sch: 2/10 Rpt: 15/23	Texas Consumer Lenders PAC 00064956
4 Date	5 Payee name
09/09/2024	Bhojani for Texas
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	6301 Campus Circle Drive East
Expenditure from	Suite 100
corporate funds	Irving, TX 75063
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
_/	Candidate/Officeholder/Political Committee
	Political Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/13/2024	Brent Hagenbuch Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	2800 Shoreline Dr #310
Ψ5,000.00	2000 Shoreline Di #010
Expenditure from corporate funds	Denton, TX 76210
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Political Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
'	
Date	Payee name
09/09/2024	Briscoe Cain for Texas
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 7
Expenditure from corporate funds	Deer Park, TX 77536
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Candidate/Officeholder/Political Committee
	Political Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialities to beliefft C/OI	•

SCHEDULE F1

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

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 complete thi	is form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 3/10 Rpt: 16/23	Texas Consumer Lenders PAC	00064956
4 Date	5 Payee name	·
09/09/2024	Caroline Fairly for Texas	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$500.00	1000 Taylors St.	
Expenditure from	Apt 10	
corporate funds	Amarillo, TX 79101	
8 PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense itical Contribution
		200
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
09/09/2024	Cesar Blanco for State Senate	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	P.O. Box 27074	
Expenditure from corporate funds	El Paso, TX 79926	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	cription
OF EXPENDITURE	Continuations/Donations wade by	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Carididate/Ciniceriolaei/i Cinical Committee	itical Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
09/09/2024	Charles Schwertner Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$5,000.00	PO Box 2448	
Expenditure from corporate funds	Georgetown, TX 78627	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	•
OF EXPENDITURE	Contributions/Donations wade by	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

Political Contribution

Office held

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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (other a cottographed listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	,
1 Total pages Schedule F1:	
Sch: 4/10 Rpt: 17/23	Texas Consumer Lenders PAC 00064956
4 Date	5 Payee name
09/09/2024	Chuy Hinojosa Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	612 W. Nolana
, ,	Ste. 410
Expenditure from	
corporate funds	McAllen, TX 78504
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Total Contribution
O Consulate ONLY if allocat	On alidate (Office health a grants
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/09/2024	Cody Harris Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	1007 N Mallard St
Expenditure from corporate funds	Palestine, TX 75801
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder (Political Committee) Check if Austin, TX, officeholder living expense
	Political Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	o
Date	Payee name
09/09/2024	David Cook for Texas
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	309 East Broad
Expenditure from corporate funds	Mansfield, TX 76063
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Political Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Tatal manua Cabadula Edu	,
1 Total pages Schedule F1: Sch: 5/10 Rpt: 18/23	2 FILER NAME Texas Consumer Lenders PAC 3 Filer ID (Ethics Commission Filers) 00064956
4 Date	5 Payee name
09/09/2024	Donna Campbell Campaign
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code PO Box 171002
Expenditure from corporate funds	San Antonio, TX 78217
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Political Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete ONLY if direct expenditure to benefit C/OI	
Date	Payee name
09/09/2024	Giovanni Capriglione Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$3,000.00	Po Box 92007
— Foresaditus from	
Expenditure from corporate funds	Southlake, TX 76092
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Total Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	v
Date	Payee name
09/09/2024	House Republican Caucus
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	PO Box 13305
Evpanditura from	
Expenditure from corporate funds	Austin, TX 78711
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LA LABITORE	Candidate/Officeholder/Political Committee
	Political Contribution
Complete <u>ONLY</u> 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 Committee

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)

Credit Card Payment	The Instruction Guide explains how to com	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 6/10 Rpt: 19/23	Texas Consumer Lenders PAC	00064956
4 Date	5 Payee name	
09/09/2024	Hubert Vo Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$500.00	P.O. Box 2227	
Expenditure from corporate funds	Alief, TX 77411	
8 PURPOSE		D) Description
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
		Political Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/O	1	
Date	Payee name	
09/09/2024	Jared Patterson Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	PO Box 5419	
. ,		
Expenditure from corporate funds	Frisco, TX 75035	
PURPOSE		N. Description
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
		Political Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/O	1	
Date	Payee name	
09/09/2024	John McQueeney Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	PO Box 100458	
Expenditure from corporate funds	Fort Worth, TX 76185	
PURPOSE		N Description
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
		Political Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/O	1	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - 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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 7/10 Rpt: 20/23	Texas Consumer Lenders PAC 00064956
4 Date	5 Payee name
09/09/2024	Morgan LaMantia for State Senate
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	1324 E Madison
Expenditure from corporate funds	Brownsville, TX 78520
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Political Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit ever	
Date	Payee name
09/09/2024	Pat Curry Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	204 Woodhew Drive
— Formanditure from	
Expenditure from corporate funds	Waco, TX 76712
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LXI LINDITORE	Candidate/Officeholder/Political Committee
	Political Contribution
Commission ONII V if dispose	Condidate/Office holder name Office pought
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/09/2024	Phil King Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	PO Box 1913
Expenditure from	
corporate funds	Weatherford, TX 76086
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	1 Shada Contribution
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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

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:	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1: Sch: 8/10 Rpt: 21/23	Texas Consumer Lenders PAC 00064956
4 Date	5 Payee name
09/09/2024	Sam Harless Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	15814 Champion Forest PMB 312
Expenditure from	
corporate funds	Spring, TX 77379
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
LAFENDITORE	Candidate/Officeholder/Political Committee
	Political Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorities to benefit C/OI	
Date	Payee name
09/09/2024	Tan Parker Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	P.O. Box 271741
,_,,,,,,,,,	
Expenditure from	Flower Mound, TV 75027
corporate funds	Flower Mound, TX 75027
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Political Contribution
	1 onded Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
·	
Date	Payee name
09/09/2024	Terri Leo-Wilson Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	29 Pirates Bch W
Expenditure from corporate funds	Galveston, TX 77554
PURPOSE	1
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Political Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	y

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 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)

Credit Card Payment	The Instruction Guide explains how to cor	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 9/10 Rpt: 22/23	Texas Consumer Lenders PAC	00064956
4 Date	5 Payee name	
09/09/2024	Texas Public Policy Foundation	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$5,000.00	901 Congress Ave	
Expenditure from corporate funds	Austin, TX 78701	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Onicenoiden/Political Committee	Political Contribution
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office soug	ght Office held
Date	Payee name	
09/09/2024	Toni Rose Campaign	
Amount (\$)	Payee address; City; State; Zip Co	de
\$1,000.00	PO Box 41867	
Expenditure from corporate funds	Dallas, TX 75241	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee	Political Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ght Office held
Date	Payee name	
09/09/2024	Trey Wharton Campagin	
Amount (\$)	Payee address; City; State; Zip Co	de
\$500.00	PO Box 1242	
- Constability Cons		
Expenditure from corporate funds	Huntsville, TX 71342	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense Political Contribution

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

Office held

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

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

Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	
1 Total pages Schedule F1: Sch: 10/10 Rpt: 23/23	Texas Consumer Lenders PAC 00064956
4 Date 09/09/2024	5 Payee name Wes Virdell Campaign
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 147
Expenditure from corporate funds	Brady, TX 76825
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held