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) 00016799 3 COMMITTEE NAME **OFFICE USE ONLY** National Rifle Association Political Victory Fund Date Received **ELECTRONICALLY FILED** 10/07/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 11250 Waples Mill Rd. Date Hand-delivered or Date Postmarked Change of Address Fairfax, VA 22030 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Zak NAME NICKNAME LAST **SUFFIX** Funderburk STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 11250 Waples Mill Road STREET **ADDRESS** (Residence or Business) Fairfax, VA 22030 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** MAILING **ADDRESS** TX Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (703) 267-1152 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 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2024 09/26/2024 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

12 COMMITTEE NAME	2 COMMITTEE NAME		13 Filer ID	(Ethics Commission Filers)
National Rifle Associa	ation Political Victory Fun	d	00016799	
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		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D 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)	\$	1,974.63
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	1,974.63
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	0.00
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of per true and correct and includes all inform under Title 15, Election Code.		
		Zak Fur	nderburk	
		Signature of Car	npaign Treasurer	
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said	, th	is the	day
of	, 20, to certify \	which, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of officer	administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

			3 of 13
17 COMMITTEE NAME 18 Filer ID			(Ethics Commission Filers)
National I	National Rifle Association Political Victory Fund 00016799		
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 1,974.63
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	DR .	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPOR LABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	2	\$
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		\$
9.	9. SCHEDULE E: LOANS		\$
10. X	10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$ 1,974.63
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$		\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$		\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

	ONS	SCHEDULE A1
truction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/13
ME Rifle Association Political Victory Fund		3 Filer ID (Ethics Commission Filers) 00016799
5 Full name of contributor out-of-state PAC (ID#: Unitemized Lump Sum, Unitemized 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$1,974.63
Various, TX 78701	T	
occupation / Job title (See Instructions)	9 Employer (See Instructions	s)
- F	ME Rifle Association Political Victory Fund 5 Full name of contributor	Fifle Association Political Victory Fund 5 Full name of contributor out-of-state PAC (ID#:) Unitemized Lump Sum, Unitemized 6 Contributor address; City; State; Zip Code Various, TX 78701

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	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: 1/9 Rpt: 5/13	National Rifle Association Political Victory Fund 00016799
4 Date	5 Payee name
09/19/2024	C2 Imaging, LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$4.86	8000 GRAINGER COURT
Expenditure from corporate funds	Springfield, VA 22153
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.
	Candidate/Officeholder/Political Committee
	Paper for invites for event supporting Mark Dorazio H122. In-kind
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
09/19/2024	C2 Imaging, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$4.86	8000 GRAINGER COURT
Expenditure from	
corporate funds	Springfield, VA 22153
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
	Paper for invites for event supporting John Lujan H118. In-kind
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
09/19/2024	C2 Imaging, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$4.86	8000 GRAINGER COURT
Expenditure from corporate funds	Springfield, VA 22153
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
	Paper for invites for event supporting Ben Mostyn H117.In-kind.
Complete <u>ONLY</u> 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 Co 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

Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Service		Wages/Contract Labor	OTHER (enter a	category not listed above)
		ction Guide explains how to c	ompiete this form.		
1 Total pages Schedule F1:	2 FILER NAME			3 Filer ID	(Ethics Commission Filers)
Sch: 2/9 Rpt: 6/13	National Rifle Associ	ation Political Victory Fun	d	00016799	
4 Date	5 Payee name				
09/19/2024	C2 Imaging, LLC				
6 Amount (\$)	7 Payee address; Cit	y; State; Zip C	ode		
\$7.19	8000 GRAINGER CO	DURT			
Expenditure from corporate funds	Springfield, VA 2215	3			
8 PURPOSE			(h) 5		
OF	(a) Category (See Categories		(b) Description	outside of Texas. Com	nloto Schodulo T
EXPENDITURE	Contributions/Donation	er/Political Committee	ı <u>—</u>	ı, TX, officeholder living	
	Candidate/Oniceriole	ci/i dilical committee	. —		upporting Janie Lopez
			HD37. In-Kin		
9 Complete ONLY if direct	Candidate/Officeholder n	ame Office so	uaht	Office he	eld
expenditure to benefit C/O	Н				
Date	Dayoo nama				
09/19/2024	Payee name				
	C2 Imaging, LLC				
Amount (\$)	Payee address; Cit		ode		
\$7.20	8000 GRAINGER CO	DURT			
Expenditure from					
corporate funds	Springfield, VA 2215	3			
PURPOSE	(a) Category (See Categories	listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Contributions/Donation		Check if travel	outside of Texas. Com	plete Schedule T.
EXI ENDITORE	Candidate/Officehold	er/Political Committee	. –	ı, TX, officeholder living	
			SD27. In-kind		upporting Adam Hinojosa
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder n	ame Office so	ught	Office he	eld
experientare to benefit 6/6					
Date	Payee name				
09/26/2024	Derive Technologies				
Amount (\$)	Payee address; Cit	y; State; Zip C	ode		
\$6.07	PO Box 1651				
Expenditure from corporate funds	Madison, WI 53701				
PURPOSE	(a) Category (See Categories	listed at the ten of this sehedule	(b) Description		
OF	graphic design for tex			outside of Texas. Com	plete Schedule T.
EXPENDITURE	grapino decign for to	tt moodagoo	Check if Austin	ı, TX, officeholder living	g expense
			graphic desig	gn for text mess	ages
Complete ONLY if direct	Candidate/Officeholder n	ame Office so	ught	Office he	eld
expenditure to benefit C/O	^H Hinojosa, Adam	State Se	enator District 27	State S	enator District 27

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

	The Instruction Guide explains i	now to complete this form.
1 Total pages Schedule F1: Sch: 3/9 Rpt: 7/13	FILER NAME National Rifle Association Political Victor	3 Filer ID (Ethics Commission Filers) ory Fund 00016799
4 Date 09/26/2024	5 Payee name Derive Technologies	1
6 Amount (\$) \$6.09	7 Payee address; City; State; PO Box 1651	Zip Code
Expenditure from corporate funds	Madison, WI 53701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this school Graphic design for text messages	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphic design for text messages
Complete ONLY if direct expenditure to benefit C/OF	1	office sought Office held state Representative District 34 State Representative District 34
Date 09/26/2024	Payee name Derive Technologies	
Amount (\$) \$6.07	Payee address; City; State; PO Box 1651	Zip Code
Expenditure from corporate funds	Madison, WI 53701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Graphic design for text messages	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphic design for text messages
Complete ONLY if direct expenditure to benefit C/OF	ı .	office sought Office held state Representative District 37
Date 09/26/2024	Payee name Derive Technologies	
Amount (\$) \$6.07	Payee address; City; State; PO Box 1651	Zip Code
Expenditure from corporate funds	Madison, WI 53701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Graphic design for text messages	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Graphic design for text messages
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	I .	Office sought Office held State Representative District 52

SCHEDULE F1

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

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

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

	Credit Card F ayment	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: 4/9 Rpt: 8/13	National Rifle Association Political Victory Fund	d	00016799	
4	Date	5 Payee name			
	09/26/2024	Derive Technologies			
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode		
	\$6.07	PO Box 1651			
	Expenditure from corporate funds	Madison, WI 53701			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Graphic design for text messages	(b) Description Check if travel out	utside of Texas. Con	nplete Schedule T.
	EXPENDITURE	Graphic design for text messages		TX, officeholder livin	
			Graphic desig	n for text mes	sages
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office h	eld
,	expenditure to benefit C/O	1	presentative Distric		Representative District 54
	Date	Payee name			
	09/26/2024	Derive Technologies			
	Amount (\$)	Payee address; City; State; Zip Co	ode		
	\$6.07	PO Box 1651			
	Expenditure from corporate funds	Madison, WI 53701			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
	OF EXPENDITURE	Graphic design for text messages	ш	utside of Texas. Con TX, officeholder livin	
			Graphic design		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	•	Office h	eld
	experialiture to benefit C/Oi	¹ Hickland, Hillary State Re	presentative Distric	ct 55	
	Date	Payee name			
	09/26/2024	Derive Technologies			
	Amount (\$) \$6.07	Payee address; City; State; Zip Co	ode		
	φ0.07	PO B0X 1031			
	Expenditure from corporate funds	Madison, WI 53701			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	utside of Texas. Con	anloto Schodulo T
	EXPENDITURE	Graphic design for text messages		TX, officeholder livin	
			Graphic design	n for text mes	sages
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sou	-	Office h	
	,	¹ Bumgarner , Ben State Re	presentative Distric	l os State F	Representative District 63

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

Credit Card Payment	The Instruction Guide explains how to comp	olete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/9 Rpt: 9/13	National Rifle Association Political Victory Fund	00016799
4 Date	5 Payee name	
09/26/2024	Derive Technologies	
6 Amount (\$)	7 Payee address; City; State; Zip Code)
\$6.07	PO Box 1651	
Expenditure from		
corporate funds	Madison, WI 53701	
8 PURPOSE OF	,	Description
EXPENDITURE	Graphic design for text messages	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Graphic design for text messages
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI	Shaheen, Matt State Repr	esentative District 66 State Representative District 66
Date	Payee name	
09/26/2024	Derive Technologies	
Amount (\$)	Payee address; City; State; Zip Code)
\$6.07	PO Box 1651	
Expenditure from		
corporate funds	Madison, WI 53701	
PURPOSE OF	,	Description
EXPENDITURE	Graphic design for text messages	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Graphic design for text messages
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI	Leach, Jeff State Repr	esentative District 67 State Representative District 67
Date	Payee name	
09/26/2024	Derive Technologies	
Amount (\$)	Payee address; City; State; Zip Code	
\$6.07	PO Box 1651	
Expenditure from		
corporate funds	Madison, WI 53701	
PURPOSE OF	,) Description
EXPENDITURE	Graphic design for text messages	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Graphic design for text messages
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/OI	H Kinard, Steve State Repre	esentative District 70

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

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:		i)
Sch: 6/9 Rpt: 10/13	National Rifle Association Political Victory Fund 00016799	
4 Date	5 Payee name	
09/26/2024	Derive Technologies 7. Power address: City City Tip Code	
6 Amount (\$) \$6.07	7 Payee address; City; State; Zip Code PO Box 1651	
Ψ0.07	1 O BOX 1001	
Expenditure from corporate funds	Madison, WI 53701	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Graphic design for text messages Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Graphic design for text messages	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held Mel aughlin Don State Pergeontative District 90	
· .	Michaughin, Don State Representative District 60	_
Date 09/26/2024	Payee name Derive Technologies	
Amount (\$)	Payee address; City; State; Zip Code	
\$6.07	Po Box 1651	
Ψ0.0.	10 500 1001	
Expenditure from corporate funds	Madison, WI 53701	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taylor Complete Schedule T	_
EXPENDITURE	Graphic design for text messages Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Graphic design for text messages	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held Chan Button Applies State Pergagantative District 112 State Pergagantative District	
	State Representative District 112 State Representative District	
Date 09/26/2024	Payee name Derive Technologies	
	Derive Technologies	
Amount (\$) \$6.07	Payee address; City; State; Zip Code PO Box 1651	
ψυ.υ ι	PO B0X 1031	
Expenditure from corporate funds	Madison, WI 53701	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
EXPENDITURE	Graphic design for text messages Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Graphic design for text messages	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experialture to beliefit Groi	Lujan, John State Representative District 118 State Representative District	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	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: 11/13	National Rifle Association Political Victory Fund 00016799
4 Date	5 Payee name
09/26/2024	Derive Technologies
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6.07	PO Box 1651
Expenditure from corporate funds	Madison, WI 53701
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Graphic design for text messages
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Graphic design for text messages
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Hull, Lacey State Representative District 138 State Representative District
Date	Payee name
09/19/2024	HBP Marketing, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$339.63	952 Frederick Street -
Expenditure from corporate funds	Hagerstown, MD 21740
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Invites for event in support of Adam Hinojosa SD 27. In-Kind.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/19/2024	HBP Marketing, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$339.61	952 Frederick Street -
Expenditure from corporate funds	Hagerstown, MD 21740
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Invites for event in support of Janie Lopez HD 37. In-
	kind
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

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	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/9 Rpt: 12/13	National Rifle Association Political Victory Fund 00016799
4 Date	5 Payee name
09/19/2024	HBP Marketing, LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$227.14	952 Frederick Street -
·	
Expenditure from corporate funds	Hagerstown, MD 21740
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
	Invites for event supporting John Lujan H118. In-kind
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/19/2024	HBP Marketing, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$227.14	952 Frederick Street -
ΨΖΖ1.14	932 Flederick Street -
Expenditure from	
corporate funds	Hagerstown, MD 21740
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
_/	Candidate/Officeholder/Political Committee
	Invites supporting Mark Dorazio H122. In-Kind.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to beliefit C/Or	1
Date	Payee name
09/19/2024	HBP Marketing, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$227.14	952 Frederick Street -
ΨΖΖ1.14	332 Frederick Street
Expenditure from corporate funds	Hagerstown, MD 21740
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.
LAPENDITORE	Candidate/Officeholder/Political Committee
	Invites for event supporting Ben Mostyn H117. In-
	kind.
Complete ONLY if direct	Candidate/Officeholder name Office sought 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 -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/Politica Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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: 9/9 Rpt: 13/13	2 FILER NAME National Rifle Association Political Victory Fund 3 Filer ID (Ethics Commission Filers) 00016799
4 Date 09/04/2024	5 Payee name TEXAS HOUSE REPUBLICAN CAUCUS
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO BOX 13305
Expenditure from corporate funds	Austin, TX 78711
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 Direct Contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held