FORM DCE COVER SHEET PG 1

The DCE Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 00070169						2 Total pages filed: 7	
3	FILER NAME	MS / MRS / MR	FIRST		MI	OFFICE U	ISE ONLY
		NICKNAME	LAST Texas Home S	School Coalition	SUFFIX	Date Received ELECTRONICA 10/28/2024	LLY FILED
4	FILER ADDRESS	ADDRESS / PO BOX; AP	T / SUITE #; CIT	Y; STATE;	ZIP CODE		
	Change of Address	c/o Tim Lambert P.O. Box 6747 Lubbock, TX 79493				Date Hand-delivered or Receipt #	Date Postmarked Amount
5	FILER PHONE	AREA CODE PHO	NE NUMBER	EXTENSION			
		(806) 744-4441				Date Processed	
6	REPORT TYPE	January 15	30	th day before electio	n	Date Imaged	
		July 15	X 8tl	n day before election			
			Ru	unoff			
7	PERIOD COVERED	Month Day Year 07/01/2024		HROUGH	Month Day 10/26/202	Year 4	
8	ELECTION	ELECTION DATE Month Day Year 11/05/2024		rimary Seneral	ELECTION T	YPE Other	
9	FILER ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported M	r. Adam Hinojos	a State Senator		
	(Attach lists on plain paper to complete this report if		B. Opposed				
	necessary.)	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.)					
			GO 1	TO PAGE 2			

FORM DCE COVER SHEET PG 2

ILER NAME	00070169 (Etnics Commission Filers)		
exas Home School Coalition Association			
XPENDITURE 1. TOTAL UNITEM OTALS	IZED POLITICAL EXPENDITURES	\$	(
2. TOTAL POLIT	TCAL EXPENDITURES	\$	6,273
FFIDAVIT			
	I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.	of perjury, that the accomp I information required to be	anying report is reported by me
		gnature of Filer or vith authority to sign on beha	alf of entity
	(only	if Filer is an entity)	
Signature of officer administering oath	Printed name of officer administering oath	Title of officer adm	ninistering oath

FORM DCE ADDENDUM

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ACTIVITY	1. Candidates	Δ Supported		11 Filer ID (Ethics Commission Filers) 00070169
12 COMMITTEE ACTIVITY	1. Candidates	Δ Supported		000,0108
ACTIVITY		A Supported		
/A++ - -+ -	(identify by name or, if applicable, classify by party)		Mrs. Denise Villalobos State Re	presentative
(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)			
		<u> </u>		
12 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)		Mrs. Janie Lopez State Represe	entative
12 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		
	Officeholders Assisted (identify by name or, if applicable, classify by party)		Caroline Harris Davila State Re	presentative

FORM DCE ADDENDUM

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40 511 50 114145				44.51	15	(Edition 0
10 FILER NAME				11 File		(Ethics Commission Filers)
Texas Home School C	oalition Association			000	70169	
12 COMMITTEE ACTIVITY	Candidates (identify by name or, if applicable, classify by party)		Mr. Steve Kinard Sta	ate 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				
	3. Officeholders Assisted (identify by name or, if applicable, classify by party)					
40.00141417777		1				
12 COMMITTEE ACTIVITY	Candidates (identify by name or, if applicable, classify by party)		Mr. Robert Garza St	ate 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)					
12 COMMITTEE ACTIVITY	Candidates (identify by name or, if applicable, classify by party)		Mr. Don McLaughlin	State Representat	tive	
(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)					
	1 23,	ı				

FORM DCE ADDENDUM

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10 FILER NAME				11 Filer ID	(Ethics Commission Filers)
Texas Home School Coalition Association				00070169	
12 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)		Mr. John Lujan State Represen	tative	
42 COMMITTEE	+	A C			
12 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			
	3. Officeholders Assisted (identify by name or, if applicable, classify by party)		Mr. Marc LaHood State Repres	entative	

(SUE	3T(OTALS - DCE		FORM DCE
				C	OVER SHEET PG 3 6 of 7
	FILER			15 Filer ID	(Ethics Commission Filers)
	Гехаѕ	Hon	me School Coalition Association	00070169	
	SCHEI NAME			SUBTOTAL AMOUNT	
1	L. [<u>)</u>	X	SCHEDULE F1: POLITICAL EXPENDITURES		\$ 6,273.72
2	2.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
3	3.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$

POLITICAL EXPENDITURES SCHEDULE F1 **EXPENDITURE CATEGORIES FOR BOX 8(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 OTHER (enter a category not listed above) Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) 00070169 Sch: 1/1 Rpt: 7/7 Texas Home School Coalition Association 4 Date Payee name 10/11/2024 Mail Pro USA 6 Amount (\$) Payee address; City; State; Zip Code \$6,273.72 2016 E Randol Mill Rd Ste 408 Expenditure from Arlington, TX 76011 corporate funds 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Postage for physical direct mail pieces Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH