

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

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| 12 COMMITTEE NAME East Texans for Liberty Political Action Committee | 13 Filer ID (Ethics Commission Filers) 00082978 |
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| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported |
| | | 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.) | |

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| 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ 470.00 |
| | <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold | |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 1,470.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 578.58 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 3,317.71 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 5,012.50 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Marty Rhymes

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - GPAC

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| 17 COMMITTEE NAME East Texans for Liberty Political Action Committee | | 18 Filer ID (Ethics Commission Filers) 00082978 |
| 19 SCHEDULE SUBTOTALS | | SUBTOTAL AMOUNT |
| | NAME OF SCHEDULE | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 1,470.00 |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 5. | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 6. | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 7. | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 8. | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 9. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 10. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 3,317.71 |
| 11. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 13. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 14. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 15. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/7 |
| 2 FILER NAME East Texans for Liberty Political Action Committee | | 3 Filer ID (Ethics Commission Filers) 00082978 |
| 4 Date 11/18/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hefner, Cole <hr/> 6 Contributor address; City; State; Zip Code Mt. Pleasant, TX 75455 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) State House Representative | | 9 Employer (See Instructions) State of Texas |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 1/3 Rpt: 5/7 | 2 FILER NAME East Texans for Liberty Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00082978 |
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| 4 Date 11/04/2024 | 5 Payee name Banners on the Cheap |
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| 6 Amount (\$) \$291.21 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 11525a Stonehollow Dr. Austin, TX 78758 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banner Flag |
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|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 11/04/2024 | Payee name Call Multiplier |
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| Amount (\$) \$135.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 201 Robert S. Kerr Ave Ste 210 Oklahoma City, OK 73102 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense texting |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 12/17/2024 | Payee name Dickey's BBQ |
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| Amount (\$) \$350.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1903 W. Loop 281 Longview, TX 75604 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tip |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 2/3 Rpt: 6/7 | 2 FILER NAME East Texans for Liberty Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00082978 |
| 4 Date 10/30/2024 | 5 Payee name Escapade International | |
| 6 Amount (\$) \$756.16 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1154 N. Scenic Hwy Lake Wales, FL 33853 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Trump Gear | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hats, flags |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/31/2024 | Payee name Gilmer Mirror | |
| Amount (\$) \$320.50 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 214 E. Marshall St Gilmer, TX 75644 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Open House |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/27/2024 | Payee name Halo Cowboy Church | |
| Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 6761 SH-154 Gilmer, TX 75644 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense rental |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
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| 1 Total pages Schedule F1: Sch: 3/3 Rpt: 7/7 | 2 FILER NAME East Texans for Liberty Political Action Committee | 3 Filer ID (Ethics Commission Filers) 00082978 |
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| 4 Date 12/18/2024 | 5 Payee name Hilton Garden Inn |
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| 6 Amount (\$) \$286.26 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 905 E. Hawkins Pkwy Longview, TX 75605 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel Out of District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Swearing In at Capital |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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|--------------------|---------------------------|
| Date 10/29/2024 | Payee name The Reserve |
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| Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 7725 US 259 N. Longview, TX 75605 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rental |
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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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