#### 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) 00088502 3 COMMITTEE NAME **OFFICE USE ONLY** Texans for Reasonable Solutions PAC Date Received **ELECTRONICALLY FILED** 01/15/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 2028 East Ben White Blvd. Date Hand-delivered or Date Postmarked #240-1318 Change of Address Austin, TX 78741 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Stephanie NAME NICKNAME LAST **SUFFIX** Matthews STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 2028 East Ben White Blvd. STREET **ADDRESS** #240-1318 (Residence or Business) Austin, TX 78741 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2028 East Ben White Blvd. MAILING **ADDRESS** #240-1318 Austin, TX 78741 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (210) 789-9044 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 10/27/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/06/2024 χ 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)
Texans for Reasonal	ole Solutions PAC		00088502	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Adam Hinojosa 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		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
<b>15</b> CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)  qualifies for the higher itemization threshold	\$	0.00
	I	AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	100,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	163.58
	4. TOTAL POLITICA	AL EXPENDITURES	\$	88,945.58
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST IG PERIOD	DAY \$	52,022.10
OUTSTANDING LOAN TOTALS	•	AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING 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.		
		Stenhanie	e Matthews	
			mpaign Treasurer	
AFFIX NOTA	RY STAMP / SEAL ABOVE	Ç		
Sworn to and subscrib	ed before me, by the said	, tl	his 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

#### FORM GPAC **ADDENDUM**

B. Opposed	Brian Birdwell State Senator	13 Filer ID 00088502	(Ethics Commission Filers)
A. Supported classify by party.)  B. Opposed	Brian Birdwell State Senator	00088502	
B. Opposed	Brian Birdwell State Senator		
Sures A. Supported by date and election and ssue.)	ı		
B. Opposed			
eholders sted v name or, if classify by party.)			
didates A. Supported and or, if classify by party.)	Charles Perry State Senator		
B. Opposed			
Sures  by date and election and sisue.)  A. Supported  A. Supported	1		
B. Opposed			
eholders sted r name or, if classify by party.)			
didates A. Supported name or, if classify by party.)	Brandon Creighton State Sena	ator	
B. Opposed			
sures A. Supported by date and election and sue.)	1		
B. Opposed			
eholders sted			
6 S /	B. Opposed  B. Opposed	B. Opposed  Pholders ted name or, if classify by party.)  Idates name or, if classify by party.)  B. Opposed  B. Opposed  A. Supported Brandon Creighton State Sense and classify by party.)  B. Opposed  B. Opposed  B. Opposed  B. Opposed	B. Opposed  Pholders ted name or, if classify by party.)  Idates name or, if classify by party.)  B. Opposed  B. Opposed  A. Supported Brandon Creighton State Senator  B. Opposed  A. Supported  B. Opposed  B. Opposed

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texans for Reasonable	Solutions PAC			00088502	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Donna Campbell State Senator	l	
	(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	1. Candidates	A Supported	Mayes Middleton State Senator		
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Mayes Middleton State Senator		
	(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.)		Molly Cook State Senator		
	(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.)				

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texans for Reasonable	Solutions PAC			00088502	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Royce West State Senator		
	(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.)				
	COMMITTEE	Candidates		Sarah Eckhardt State Senator		
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Salah Eckhalul State Sehatul		
	(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.)				
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Phil King State Senator		
	(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.)	1			

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COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texans for Reasonable	Solutions PAC			00088502	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		AJ Louderback State Represent	tative	
(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	1. Candidates (Identify by name or, if applicable, classify by party.)		Alan Schoolcraft State Represe	ntative	
(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			
	Assisted (Identify by name or, if				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Alma Allen State Representative	е	
(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.)				
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12	COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
	Texans for Reasonable	Solutions PAC				00088502	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Ana Hernandez State Re	epresen	I Itative	
	(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	Andy Hopper State Repr	acantat	tive	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Andy Hopper State Repr	eseniai	live	
	(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	Angelia Orr State Repres	sentativ	re .	
	(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)
	Texans for Reasonable	Solutions PAC			00088502	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Angie Chen Button State Repre	sentative	
	(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	Armando Walle State Represen	tative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Amando Wale State Represen	tauve	
	(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	Barbara Gervin-Hawkins State F	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.)				

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texans for Reasonable	Solutions PAC			00088502	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Brent Money State Representat	ive	
	(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	Briscoe Cain State Representat	ive	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Briscoe Gairi State Representati		
	(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	Brooks Landgraf State Represe	ntative	
	(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.)				

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COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texans for Reasonable		_		00088502	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Caroline Fairly State Representa	ative	
(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.)		Caroline Harris-Davila State Re	presentative	
(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.)		Carrie Isaac State Representativ	ve	
(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.)				

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COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Texans for Reasonable	Solutions PAC			00088502
	Candidates     (Identify by name or, if applicable, classify by party.)		Charlie Geren State Representa	ative
paper to complete this		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.)			
	1. Candidates	A. Supported	Claudia Ordaz Perez State Rep	resentative
	(Identify by name or, if applicable, classify by party.)			
paper to complete this		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted			
	Candidates     (Identify by name or, if applicable, classify by party.)		Cody Harris State Representativ	/e
paper to complete this		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.)			
		Texans for Reasonable Solutions PAC  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  COMMITTEE ACTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)  COMMITTEE ACTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  2. Measures (Describe by date and location of election and nature of issue.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Identify by name or, if applicable, classify by party.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Identify by name or, if applicable, classify by party.)  3. Officeholders Assisted  1. Candidates (Identify by name or, if applicable, classify by party.)  3. Officeholders Assisted  3. Officeholders Assisted	Texans for Reasonable Solutions PAC  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  A. Supported  (Attach lists on plain paper to complete this report if necessary.)  B. Opposed  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  B. Opposed  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  B. Opposed  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  B. Opposed  B. Opposed  A. Supported  (Bestife by name or, if applicable, classify by party.)  B. Opposed  B. Opposed  B. Opposed	Texans for Reasonable Solutions PAC  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)  (Attach lists on plain paper to complete this report if necessary.)

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12	COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
	Texans for Reasonable	Solutions PAC				00088502	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Cole Hefner S	State Representativ	ve	
	(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	1. Candidates	A Supported	Daniel Alders	State Representat	tivo	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Daniel Aluers	State Representa	uve	
	(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	David Lowe S	State Representativ	/e	
	(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)
	Texans for Reasonable	Solutions PAC			00088502	
	COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		David Spiller State Representati	ive	
	(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	1. Candidates	A. Supported	Denise Villalobos State Represe	entative	
	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	Dennis Paul State Representation	ve	
	(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.)				
		1 , , , , , , , , , , , , , , , , ,	l			

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						1 age 1 1 01 00
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texans for Reasonable	Solutions PAC			00088502	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Diego Bernal State Representa	I tive	
	(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	Candidates	A Supported	Don McLaughlin State Represe	ntative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Don wice augmin State Represe	manve	
	(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	Donna Howard State Represen	tative	
	(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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COMMITTEE NAME Fexans for Reasonable COMMITTEE				<b>13</b> Filer ID	(Ethics Commission Filers)
COMMITTEE				00000000	
				00088502	
ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Dr. Brad Buckley State Represe	entative	
Attach lists on plain paper to complete this eport 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	Drew Darby State Representativ	/e	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		,		
Attach lists on plain paper to complete this eport if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Dustin Burrows State Represent	tative	
Attach lists on plain paper to complete this eport 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.)				
	Attach lists on plain aper to complete this eport if necessary.)  COMMITTEE ACTIVITY  Attach lists on plain aper to complete this	(Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  Attach lists on plain apper to complete this apport if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  COMMITTEE (CTIVITY  Attach lists on plain apper to complete this applicable, classify by party.)  Attach lists on plain apper to complete this applicable, classify by party.)  2. Measures (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if application of election and nature of issue.)	(Describe by date and location of election and nature of issue.)  3. Officeholders	(Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by parry.)  Attach lists on plain aper to complete this export if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by parry.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by parry.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by parry.)  COMMITTEE (CTIVITY  1. Candidates (Identify by name or, if applicable, classify by parry.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by parry.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by parry.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by parry.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by parry.)  B. Opposed	Committee   Comm

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COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texans for Reasonable	Solutions PAC				00088502	
	Candidates (Identify by name or, if applicable, classify by party.)		Ellen Troxclai	State Representa	ative	
paper to complete this		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.)					
	Candidates  (Identify by name or if	A. Supported	Eric Zwiener	State Representati	ive	
paper to complete this		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.)					
	Candidates (Identify by name or, if applicable, classify by party.)		Cecil Bell Jr.	State Representati	ive	
paper to complete this		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.)					
		Texans for Reasonable Solutions PAC  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  COMMITTEE ACTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  2. Measures (Identify by name or, if applicable, classify by party.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Texans for Reasonable Solutions PAC  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  COMMITTEE ACTIVITY  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  COMMITTEE ACTIVITY  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Texans for Reasonable Solutions PAC  COMMITTEE (dentity by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  3. Officeholders Assisted (dentity by name or, if applicable, classify by party.)  COMMITTEE (ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  1. Candidates (Describe by date and location of election and nature of issue.)  B. Opposed  COMMITTEE (Complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  B. Opposed  COMMITTEE (Describe by date and location of election and nature of issue.)  B. Opposed  COMMITTEE (Describe by date and location of election and nature of issue.)  B. Opposed  COMMITTEE (Describe by date and location of election and nature of issue.)  B. Opposed  COMMITTEE (Describe by date and location of election and nature of issue.)  B. Opposed  COMMITTEE (Describe by date and location of election and nature of issue.)  COMMITTEE (Describe by date and location of election and nature of issue.)  COMMITTEE (Describe by date and location of election and nature of issue.)  COMMITTEE (Describe by date and location of election and nature of issue.)  COMMITTEE (Describe by date and location of election and nature of issue.)  COMMITTEE (Describe by date and location of election and nature of issue.)  B. Opposed  COMMITTEE (Describe by date and location of election and nature of issue.)  B. Opposed  COMMITTEE (Describe by date and location of election and nature of issue.)  B. Opposed  COMMITTEE (Describe by date and location of election and nature of issue.)  B. Opposed	Texans for Reasonable Solutions PAC COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  A. Supported  D. Opposed  A. Supported  D. Opposed  A. Supported  D. Opposed  D. Opposed	Texans for Reasonable Solutions PAC  COMMITTEE ACTIVITY  ACTIVITY

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COMMITTEE NAME  Texans for Reasonable  COMMITTEE  COTIVITY  Attach lists on plain	Solutions PAC  1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Tom Oliverson State Represent	13 Filer ID (Ethics Commission Filers) 00088502
COMMITTEE CTIVITY  Attach lists on plain	Candidates  (Identify by name or, if	A. Supported	Tom Oliverson, State Benresent	
CTIVITY Attach lists on plain	(Identify by name or, if	A. Supported	Tom Oliverson State Penrosent	
Attach lists on plain	l		Tom Onversor State Represent	ative
aper to complete this eport 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	Gary VanDeaver State Represe	entative
CTIVITY	(Identify by name or, if applicable, classify by party.)		•	
Attach lists on plain aper to complete this eport if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted			
COMMITTEE CTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Gina Hinojosa State Representa	ative
Attach lists on plain aper to complete this eport 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.)			
	Attach lists on plain aper to complete this port if necessary.)  OMMITTEE CTIVITY  Attach lists on plain aper to complete this	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  OMMITTEE CTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  OMMITTEE CTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)  Attach lists on plain apper to complete this apport if necessary.)  2. Measures (Identify by name or, if applicable, classify by party.)  2. Measures (Identify by name or, if applicable, classify by party.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	A. Supported (Identify by name or, if applicable, classify by party.)  OMMITTEE CTIVITY  Attach lists on plain aper to complete this aport if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  OMMITTEE CTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)  OMMITTEE CTIVITY  2. Measures (Identify by name or, if applicable, classify by party.)  OMMITTEE CTIVITY  2. Measures (Identify by name or, if applicable, classify by party.)  B. Opposed  3. Officeholders Assisted  A. Supported (Identify by name or, if applicable, classify by party.)  B. Opposed  3. Opposed	a. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  DOMMITTEE CTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  B. Opposed  1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and loading of ledetion and nature of issue.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  DOMMITTEE CTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)  DOMMITTEE CTIVITY  2. Measures (Identify by name or, if applicable, classify by party.)  DOMMITTEE CTIVITY  3. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  B. Opposed  3. Opposed  3. Opposed  3. Opposed  3. Opposed  3. Opposed  4. Supported  5. Supported  6. Opposed  6. Opposed  8. Opposed  9. Opposed  1. Candidates (Identify by name or, if applicable, classify by party.)  8. Opposed  1. Candidates (Identify by name or, if applicable, classify by party.)  8. Opposed  9. Opposed  1. Candidates (Identify by name or, if applicable, classify by party.)

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texans for Reasonable					00088502	
14 COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Greg Bonnen	State Representa	ative	
(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	1. Candidates	A. Supported	Helen Kerwin	State Representa	ative	
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	1. Candidates (Identify by name or, if applicable, classify by party.)		Hillary Hicklan	d State Represer	ntative	
(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.)					
	Assisted (Identify by name or, if					

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e Solutions PAC  1. Candidates (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)		J.M. Lozano State Repres	13 Filer ID 00088502 sentative	(Ethics Commission Filers)
Candidates (Identify by name or, if applicable, classify by party.)      Measures (Describe by date and location of election and)	B. Opposed	J.M. Lozano State Repres		
(Identify by name or, if applicable, classify by party.  2. Measures (Describe by date and location of election and	B. Opposed	J.M. Lozano State Repres	eentative	
(Describe by date and location of election and				
(Describe by date and location of election and	A. Supported			
	B. Opposed			
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.				
Candidates (Identify by name or, if applicable, classify by party.)		James Talarico State Rep	resentative	
	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.				
Candidates (Identify by name or, if applicable, classify by party.		Janie Lopez State Repres	entative	
	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.				
	(Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if	(Describe by date and location of election and nature of issue.)  B. Opposed  3. Officeholders Assisted	(Describe by date and location of election and nature of issue.)  B. Opposed  3. Officeholders    Assisted (Identify by name or, if	(Describe by date and location of election and nature of issue.)  B. Opposed  3. Officeholders    Assisted (Identify by name or, if

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						-
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texans for Reasonable	Solutions PAC			00088502	
14	COMMITTEE	1. Candidates	A. Supported	Janis Holt State Representative		
	ACTIVITY	(Identify by name or, if		·		
		applicable, classify by party.)				
	(Attach lists on plain		B. Opposed			
	paper to complete this report if necessary.)					
	report ii riceessai y.)					
		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.)				
	COMMITTEE	Candidates	A. Supported	Jeff Barry State Representative		
	ACTIVITY	(Identify by name or, if		•		
		applicable, classify by party.)				
	(Attach lists on plain		B. Opposed			
	paper to complete this report if 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.)				
	COMMITTEE	1. Candidates		Jeff Leach State Representative	<b>:</b>	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)				
	74 m - 1 M -					
	(Attach lists on plain paper to complete this		B. Opposed			
	report if necessary.)					
		2. Measures	A. Supported			
		(Describe by date and location of election and				
		nature of issue.)	D. Opposed			
			B. Opposed			
		3. Officeholders				
		Assisted				
		(Identify by name or, if				
		applicable, classify by party.)				

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						1 age 21 01 00
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texans for Reasonable	Solutions PAC			00088502	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Joanne Shofner State Represer	ntative	
	(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	Joe Moody State Representativ	<u> </u>	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Jue Moody State Representativ	C	
	(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	John McQueeney State Repres	entative	
	(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.)				

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COMMITTEE NAME				
				13 Filer ID (Ethics Commission Filers)
		_		00088502
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Jon Rosenthal State Repre	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.)		Katrina Pierson 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.)		Keith Bell State Representa	ative
(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  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)	ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders (Identify by name or, if applicable, classify by party.)  3. Officeholders (Identify by name or, if applicable, classify by party.)  3. Officeholders (Identify by name or, if applicable, classify by party.)	ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)	A. Supported Jon Rosenthal State Representations of paper to complete this report if necessary.)    Committee   Co

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						1 age 20 01 00
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texans for Reasonable	Solutions PAC			00088502	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Ken King 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			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	A. Supported	Keresa Richardson State Repre	sentative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Neresa Normanason State Nepre	Scritative	
	(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	Lacy Hull 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			<del></del>
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
		•	•			

### FORM GPAC ADDENDUM

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							1 ago 2 1 01 00
12	COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
	Texans for Reasonable	Solutions PAC				00088502	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Marc Lahood Sta	ate Representati	ive	
	(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	1. Candidates	A. Supported	Matt Morgan Sta	te Renresentation	V/A	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Matt Morgan Sta	ale Representati	ve	
	(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	Mitch Little State	e 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				<del></del>
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
		1					

### FORM GPAC ADDENDUM

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						1 age 20 01 00
12	COMMITTEE NAME				13 Filer ID (Eth	ics Commission Filers)
	Texans for Reasonable	Solutions PAC			00088502	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Morgan Meyer State Repre	sentative	
	(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	1. Candidates	A. Supported	Oscar Longoria State Repr	sentative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Coodi Zongona Ciato Ropi	osinauvo	
	(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	Pat Curry State Representa	tive	
	(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.)				
		1 , , -, -, -, -, -, -, -,				

### FORM GPAC ADDENDUM

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					1 ago 20 01 00
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texans for Reasonable So	olutions PAC			00088502	
ACTIVITY (Id	Candidates dentify by name or, if pplicable, classify by party.)		Paul Dyson State Represe	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
(E lo	Describe by date and cation of election and ature of issue.)	A. Supported			
		B. Opposed			
(lo	s. Officeholders Assisted dentify by name or, if pplicable, classify by party.)				
COMMITTEE 1	Candidates	A. Supported	Philip Cortez State Represe	entative	
ACTIVITY (Id	dentify by name or, if pplicable, classify by party.)		Timp Conc. State Repress	critative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
(C lo	P. Measures Describe by date and location of election and lature of issue.)	A. Supported			
		B. Opposed			
(lo	dentify by name or, if pplicable, classify by party.)				
COMMITTEE 1 ACTIVITY (it	Candidates dentify by name or, if pplicable, classify by party.)		Rafael Anchia State Repre	sentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
(C lo	2. Measures Describe by date and ocation of election and ature of issue.)	A. Supported			
		B. Opposed			
(lo	. Officeholders Assisted dentify by name or, if pplicable, classify by party.)				
I.					

### FORM GPAC ADDENDUM

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						1 age 21 61 66
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texans for Reasonable Solutions PAC					00088502	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Ramon Romero State Represe	ntative	
	(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	1. Candidates	A. Supported	Ron Reynolds State Represent	ative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Non Reynolds State Represent	auve	
	(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	Ryan Guillen State Representa	tive	
	(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.)				
			-			

### FORM GPAC ADDENDUM

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						1 age 20 01 00
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texans for Reasonable Solutions PAC					00088502	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Shelley Luther State Representa	ative	
	(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	Todd Hunter State Representati	ive	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		rodu Harrior State Representati		
	(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	Trey Martinez Fischer State Rep	presentative	
	(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.)				

### FORM GPAC ADDENDUM

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						1 age 20 01 00
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texans for Reasonable Solutions PAC					00088502	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Trey Wharton State Representa	tive	
	(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	1. Candidates	A. Supported	Valoree Swanson State Repres	entative	
	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	Vikki Goodwin State Representa	ative	
	(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.)				

#### FORM GPAC **ADDENDUM**

		Page 30 01 63
12 COMMITTEE NAME		13 Filer ID (Ethics Commission Filers)
Texans for Reasonable Solutions PAC		00088502
14 COMMITTEE ACTIVITY  1. Candidates (Identify by name or, if applicable, classify by party	A. Supported Vincent Perez State Representa	tive
(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 Wes Virdell State Representativ	10
ACTIVITY (Identify by name or, if applicable, classify by party		е
(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	(.)	

#### **SUBTOTALS - GPAC**

### FORM GPAC COVER SHEET PG 3

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	17 COMMITTEE NAME  18 Filer ID (Ethics Commission Filers)						
	Texans for Reasonable Solutions PAC 00088502						
19 SCH NAN	ME OF S		SUBTOTAL /	AMOUNT			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	100,000.00		
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$			
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	PR	\$			
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR 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.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$			
9.		SCHEDULE E: LOANS		\$			
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	88,945.58		
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 I TO FILER	RETURNED	\$			

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1	
	The Instruction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 1/1 Rpt: 32/63
2	FILER NAME Texans for F	Reasonable Solutions PAC		Filer ID (Ethics Commission Filers) 00088502
4	Date 11/15/2024	<ul> <li>Full name of contributor</li></ul>		Amount of Contribution (\$) \$100,000.00
8	Principal occu Chair	Austin, TX 78741-6931 pation / Job title (See Instructions)	9 Employer (See Instructions Texans for Reasonable	utions

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### 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

**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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/31 Rpt: 33/63	Texans for Reasonable Solutions PAC 00088502
4 Date	5 Payee name
12/11/2024	AJ Louderback Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	PO BOX 1792
Expenditure from corporate funds	Victoria, TX 77902
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
	Campaign Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/05/2024	Adam Hinojosa Campaign
	,
Amount (\$)	
\$500.00	PO Box 18301
Expenditure from	
corporate funds	Corpus Christi, TX 78480
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
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
12/11/2024	Alan Schoolcraft Campaign
Amount (\$)	
` *	
\$500.00	8647 FM 725
Expenditure from	
corporate funds	McQueeney, TX 78123
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
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

#### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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

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

Printing Expense Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/31 Rpt: 34/63 Texans for Reasonable Solutions PAC 00088502 4 Date Payee name 12/11/2024 Alma Allen Campaign 6 Amount (\$) Payee address; State; Zip Code \$500.00 3717 Cork Drive Expenditure from Houston, TX 77047-2801 corporate funds **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign Contribution Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/11/2024 Ana Hernandez Campaign Amount (\$) Payee address; City; State; Zip Code \$250.00 P.O. Box 15538 Expenditure from Houston, TX 77220 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign Contribution Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/11/2024 Andy Hopper Campaign Amount (\$) Payee address: City: State; Zip Code \$500.00 PO Box 1052 Expenditure from corporate funds Decatur, TX 76234 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign Contribution Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH

### 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 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

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: 3/31 Rpt: 35/63	Texans for Reasonable Solutions PAC 00088502
4 Date	5 Payee name
12/06/2024	Angelia Orr for Texas House
6 Amount (\$) \$700.00	7 Payee address; City; State; Zip Code PO Box 337
Expenditure from corporate funds	Itasca, TX 76055
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
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/11/2024	Angie Chen Button Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	6914 Clear Springs Cir.
Expenditure from corporate funds	Garland, TX 75044
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
2 1 2 2 1 1 2 1 1	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/09/2024	Armando Walle Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	4826 Hollybrook Ln.
Expenditure from corporate funds	Houston, TX 77039
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Condidate/Officeholder name Office cought
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
·	

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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

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

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: 4/31 Rpt: 36/63	Texans for Reasonable Solutions PAC 00088502
4 Date	5 Payee name
12/11/2024	Barbara Gervin-Hawkins Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$700.00	P.O. Box 18659
Expenditure from	
corporate funds	San Antonio, TX 78218
8 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
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/01	
Date	Payee name
12/11/2024	Brent Money Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	2606 Lee St.
Expenditure from corporate funds	Greenville, TX 75401
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
	Campaign Continuution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Davies same
12/11/2024	Payee name Brian Birdwell Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 1111
Expenditure from	
corporate funds	Granbury, TX 76048
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Continuution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

### SCHEDULE F1

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

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

Candidate/Officeholder/Politica Credit Card Payment	Committee   Legal Services   Salaries/Wages/Contract Labor   OTHER (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
Sch: 5/31 Rpt: 37/63	Texans for Reasonable Solutions PAC 00088502	
4 Date	5 Payee name	
12/11/2024	Briscoe Cain Campaign	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code P.O. Box 7	
Expenditure from corporate funds	Deer Park, TX 77536	
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  Campaign Contribution	
Complete ONLY if direct expenditure to benefit C/Or	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
12/06/2024	Brooks Landgraf Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,750.00	PO Box 13146	
Expenditure from corporate funds	Odessa, TX 79768	
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  Campaign Contribution	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Date	Payee name	_
12/11/2024	Caroline Fairly Campaign	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1000 S. Tyler St. Apt. 10	
Expenditure from corporate funds	Amarillo, TX 79101	
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  Campaign Contribution	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name 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
Credit Card Baymont

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

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

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

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: 6/31 Rpt: 38/63	2 FILER NAME Texans for Reasonable Solutions PAC 3 Filer ID (Ethics Commission Filers) 00088502
4 Date	5 Payee name
12/12/2024	Caroline Harris-Davila Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	P. O. Box 700
Expenditure from corporate funds	Round Rock, TX 78680
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/12/2024	Carrie Isaac Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	100 Commons Rd. #7-125
Expenditure from corporate funds	Dripping Springs, TX 78620
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
ZAI ZHBITONZ	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Data	Davis asses
Date	Payee name
12/12/2024	Charles Perry Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 94806
•	
Expenditure from corporate funds	Lubbock, TX 79493
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
	Campaign Contribution
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

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

	Donations Made By Officeholder/Politica		Food/Beverage Expense Gift/Awards/Memorials Expu Legal Services The Instruction Guide	ense		xpense Vages/	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above	e)
1 Total pages S	Schedule F1:	2 FILER NAMI						3	Filer ID	(Ethics Commission	Filers)
Sch: 7/31 F	Rpt: 39/63	Texans for	Reasonable Solutio	ns PAC					00088502		
4 Date		5 Payee name									
11/12/2024		Charlie Ge	en Campaign								
6 Amount (\$)		7 Payee addre	ss; City;	State;	Zip Co	de					
	\$1,000.00	PO Box 14	40								
Expenditure to corporate fun		Fort Worth,	TX 76101								
8 PURPOS OF	SE .		ee Categories listed at the to		lule)	(b)	Description				
EXPENDIT	URE		ns/Donations Made				느		de of Texas. Comp		
		Candidate/	Officeholder/Politica	a Commit	iee		Campaign Co		officeholder living	evhelise	
							Campaign OC	J. 161			
9 Complete ON	NLY if direct	Candidate/Off	iceholder name	Off	fice sou	ght			Office he	eld	
expenditure t	to benefit C/OF	1									
Date		Payee name									
12/11/2024		Claudia Or	daz Perez Campaig	ın							
Amount (\$)		Payee addre	ss; City;	State;	Zip Co	de					
	\$500.00	P.O. Box 7	1738								
	<b>6</b>										
Expenditure to corporate fur		El Paso, T	79917								
PURPOS	SE .	(a) Category (S	ee Categories listed at the to	p of this sched	lule)	(b)	Description				
OF EXPENDITI		Contributio	ns/Donations Made	Ву					de of Texas. Com		
		Candidate/Officeholder/Political Committee  Campaign Contribution  Check if Austin, TX, officeholder living expense Campaign Contribution						expense			
							Campaign Ct	או ונו	เมนแบท		
Complete ON			ceholder name	Off	fice sou	ght			Office he	eld	
expenditure t	to benefit C/OF	- <del></del>									
Date		Payee name									
11/18/2024		Cody Harri	s Campaign			_		_			
Amount (\$)		Payee addre		State;	Zip Co	de					
	\$4,500.00	1007 N. Ma	llard St.								
Expenditure		Dalectine -	TV 75001								
corporate fur		Palestine,				<i>a</i> :					
PURPOS OF	bE		ee Categories listed at the to		lule)	(a)	Description  Check if travel of	nutsir	de of Texas. Com	nlete Schedule T	
EXPENDIT	URE		ns/Donations Made Officeholder/Politica		tee				officeholder living		
		_ 5					Campaign Co				
Complete ON			ceholder name	Off	fice sou	ght			Office he	eld	
expenditure t	to benefit C/OF	1									

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense Fees Food/Beverage Expense Gift/Award/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)
_	Sch: 8/31 Rpt: 40/63	Texans for Reasonable Solutions PAC	00088502
4	Date	5 Payee name	
	12/13/2024	Cole Hefner Campaign	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,150.00	P.O. Box 167	
	Expenditure from corporate funds	Mount Pleasant, TX 75456	
8	PURPOSE OF EXPENDITURE	Continuations/Donations Made By	outside of Texas. Complete Schedule T. , TX, officeholder living expense Ontribution
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	12/11/2024	Daniel Alders Campaign	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	PO Box 8907	
	Expenditure from corporate funds	Tyler, TX 75711	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations wade by	outside of Texas. Complete Schedule T. , TX, officeholder living expense Ontribution
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	12/11/2024	David Lowe Campaign	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	9017 Cedar Breaks Drive	
	Expenditure from corporate funds	North Richland Hills, TX 76182	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	outside of Texas. Complete Schedule T. , TX, officeholder living expense Ontribution
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Polit Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

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: 9/31 Rpt: 41/63	Texans for Reasonable Solutions PAC 00088502						
4 Date	5 Payee name						
12/11/2024	David Spiller Campaign						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$1,500.00	P.O. Box 447						
- Evpanditura from							
Expenditure from corporate funds	Jacksboro, TX 76458						
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						
	Campaign Contribution						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
experience to serious experi							
Date	Payee name						
12/11/2024	Denise Villalobos Campaign						
Amount (\$)	Payee address; City; State; Zip Code						
\$500.00	10330 Kingsbury Dr						
Expenditure from corporate funds	Corpus Christi, TX 78410						
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
EXPENDITURE	Contributions/Donations Made By  Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.						
	Candidate/Officeholder/Political Committee						
	Campaign Continuation						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/O	· ·						
Date	Payee name						
12/11/2024	Dennis Paul Campaign						
Amount (\$)	Payee address; City; State; Zip Code						
\$500.00	626 1/2 Barringer Ln., Ste. E						
Expenditure from corporate funds	Webster, TX 77598						
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						
	Campaign Continuation						
Complete ONLY if dive -	Candidate/Officeholder name Office acusht						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name 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 Comm

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
OTHEP (expense a category not listed above)

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: 10/31 Rpt: 42/63	Texans for Reasonable Solutions PAC 00088502
4 Date	5 Payee name
12/09/2024	Diego Bernal Campaign
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code PO Box 12411
φ230.00	FO BOX 12411
Expenditure from corporate funds	San Antonio, TX 78212
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
	Campaign Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	
Date	Payee name
12/11/2024	Don McLaughlin Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 1707
- Funanditura from	
Expenditure from corporate funds	Uvalde, TX 78802
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
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/11/2024	Donna Howard Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	P.O. Box 5375
Expenditure from	
corporate funds	Austin, TX 78763
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
_/	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit 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 com	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 11/31 Rpt: 43/63	Texans for Reasonable Solutions PAC	00088502
4 Date	5 Payee name	<b>'</b>
12/06/2024	Dr. Brad Buckley Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Cod	e
\$1,000.00	7321 FM #2843	
Expenditure from corporate funds	Salado, TX 76571	
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	Check if Austin, TX, officeholder living expense  Campaign Contribution
		Campaign Continuation
9 Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/OI		mt Office field
<u> </u>		
Date	Payee name	
12/11/2024	Drew Darby Campaign	
Amount (\$)	Payee address; City; State; Zip Cod	e
\$500.00	P.O. Box 3284	
Expenditure from		
corporate funds	San Angelo, TX 76902	
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  Campaign Contribution
		Campaign Continuation
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	Tit Office Held
Date	Payee name	
11/29/2024	Dustin Burrows Campaign	
Amount (\$)	Payee address; City; State; Zip Cod	e
\$5,000.00	P.O. Box 2569	
Expenditure from		
corporate funds	Lubbock, TX 79408	
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  Campaign Contribution
		Campaign Continuation
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·	Office field

#### 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	
4 7	<u> </u>
1 Total pages Schedule F1:	
Sch: 12/31 Rpt: 44/63	l .
4 Date	5 Payee name
12/12/2024	Ellen Troxclair Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	701 HWY 281, Suite H #196
Expenditure from corporate funds	Marble Falls, TX 78654
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.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to benefit croi	
Date	Payee name
12/09/2024	Eric Zwiener Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 184
Expenditure from corporate funds	Driftwood, TX 78619
•	
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
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<b>o</b>
Data	
Date 11/04/2024	Payee name  Friends of Prandon Craighton
	Friends of Brandon Creighton
Amount (\$)	Payee address; City; State; Zip Code
\$4,000.00	2257 N. Loop 336, Ste. 140-366
Expenditure from	
corporate funds	Conroe, TX 77304
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LAI LADITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to benefit e.c.	<u> </u>

### 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

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: 13/31 Rpt: 45/63	2 FILER NAME Texans for Reasonable Solutions PAC  3 Filer ID (Ethics Commission Filers) 00088502						
4 Date	5 Payee name						
11/14/2024	Friends of Cecil Bell Jr						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$2,500.00	P.O. BOX 819						
Expenditure from corporate funds	Magnolia, TX 77353						
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF	Contributions/Donations Made By  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						
	Campaign Contribution						
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
11/12/2024	Friends of Donna Campbell						
Amount (\$)	Payee address; City; State; Zip Code						
\$1,000.00	1308 Common Street Ste 205 Box 719						
Expenditure from corporate funds	New Braunfels, TX 78130						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Contributions/Donations Made By						
_/	Candidate/Officeholder/Political Committee						
	Campaign Contribution						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
12/06/2024	Friends of Tom Oliverson						
Amount (\$)	Payee address; City; State; Zip Code						
\$1,000.00	1 Greenway Plaza #225						
- Foresanditure Cons							
Expenditure from corporate funds	Houston, TX 77046						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Contributions/Donations Made By						
	Candidate/Officeholder/Political Committee						
	Campaign Contribution						
Complete ONII V If all a	Condidate/Officeholder name						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						

### SCHEDULE F1

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

Fees Off Food/Beverage Expense Pol Gift/Awards/Memorials Expense Prii Legal Services Sal

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:	· · · · · · · · · · · · · · · · · · ·						
Sch: 14/31 Rpt: 46/63	Texans for Reasonable Solutions PAC 00088502						
4 Date	5 Payee name						
11/18/2024	Gary VanDeaver Campaign						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$500.00	710 James Bowie Drive						
Expenditure from corporate funds	New Boston, TX 75570						
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						
	Campaign Contribution						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
12/11/2024	Gina Hinojosa Campaign						
Amount (\$)	Payee address; City; State; Zip Code						
\$250.00	P.O. Box 300095						
Ψ230.00	F.O. Box 300093						
Expenditure from corporate funds	Austin, TX 78703						
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						
	Campaign Contribution						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Data							
Date	Payee name						
12/11/2024	Greg Bonnen Campaign						
Amount (\$)	Payee address; City; State; Zip Code						
\$1,000.00	405 David						
Expenditure from corporate funds	Friendswood, TX 77546						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF	Contributions/Donations Made By						
EXPENDITURE	Candidate/Officeholder/Political Committee						
	Campaign Contribution						
_							
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

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								
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
Sch: 15/31 Rpt: 47/63	Texans for Reasonable Solutions PAC 00088502							
4 Date	5 Payee name							
12/11/2024	Helen Kerwin Campaign							
6 Amount (\$) \$500.00	' Payee address; City; State; Zip Code 420 Grand Avenue							
Expenditure from corporate funds	Glen Rose, TX 76043							
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.							
	Candidate/Officeholder/Political Committee							
	Campaign Contribution							
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
Date	Payee name							
11/11/2024	Hillary Hickland Campaign							
Amount (\$)	Payee address; City; State; Zip Code							
\$1,000.00	6318 Brayson Oaks Ct.							
Expenditure from corporate funds	Belton, TX 76513							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Contributions/Donations Made By							
	Candidate/Officeholder/Political Committee							
	Campaign Contribution							
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held							
Date	Payee name							
12/13/2024	House Democratic Caucus							
Amount (\$)	Payee address; City; State; Zip Code							
\$1,000.00	P.O. Box 12453							
Expenditure from corporate funds	Austin, TX 78711-2453							
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							
	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

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	•	Is Expense Printing E	xpense Vages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed	d above)
1 Total pages Schedule F1:	P FILER NAME			3 Filer ID (Ethics Comm	nission Filers)
Sch: 16/31 Rpt: 48/63	Texans for Reasonable So	olutions PAC		00088502	,
4 Date	Payee name				
12/11/2024	J.M. Lozano Campaign				
6 Amount (\$)	Payee address; City;	State; Zip Co	ode		
\$1,000.00	8953 CR 2411				
Expenditure from corporate funds	Sinton, TX 78387				
8 PURPOSE	a) Category (See Categories listed at	the top of this schedule)	(b) Description		
OF EXPENDITURE	Contributions/Donations M			outside of Texas. Complete Schedule T.	
	Candidate/Officeholder/Po	olitical Committee		n, TX, officeholder living expense	
			Campaign C	OHUIDUUOH	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sou	ght	Office held	
Date	Payee name				
11/11/2024	James Talarico Campaign				
Amount (\$)	Payee address; City;	State; Zip Co	ode		
\$1,500.00	PO Box 15207				
Expenditure from corporate funds	Austin, TX 78761				
PURPOSE	a) Category (See Categories listed at	the top of this schedule)	(b) Description		
OF EXPENDITURE	Contributions/Donations M			outside of Texas. Complete Schedule T.	
	Candidate/Officeholder/Po	olitical Committee	Campaign C	n, TX, officeholder living expense	
			Campaign C	ontribution	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sou	ght	Office held	
Date	Payee name				
12/12/2024	Janie Lopez Campaign				
Amount (\$)	Payee address; City;	State; Zip Co	nde		
\$1,000.00	PO Box 2073	Otato, Zip Ot	, do		
Ψ1,000.00	1 O BOX 2010				
Expenditure from corporate funds	San Benito, TX 78586				
PURPOSE	a) Category (See Categories listed at	the top of this schedule)	(b) Description		
OF EXPENDITURE	Contributions/Donations M			outside of Texas. Complete Schedule T.	
	Candidate/Officeholder/Po	olitical Committee	<u> </u>	n, TX, officeholder living expense	
			Campaign C	บาแามนแบบ	
Complete CMI V if alian-	Candidata/Officehelder norm	Office	aht	Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sou	yııı	Office held	
,					

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	Il 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: 17/31 Rpt: 49/63	Texans for Reasonable Solutions PAC 00088502
4 Date	5 Payee name
12/11/2024	Janis Holt Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	P.O. Box 1311
Expenditure from corporate funds	Silsbee, TX 77656
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
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<b>-</b>
Date	Payee name
12/11/2024	Jeff Barry Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	4418 Broadway St.
Expenditure from corporate funds	Pearland, TX 77581
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF 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
	Campaign Continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Douge name
12/06/2024	Payee name Jeff Leach Campaign
	· -
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 866186
Expenditure from corporate funds	Plano, TX 75086
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
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
3.,50	•

### SCHEDULE F1

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

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

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 manua Cabadula E4.	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1: Sch: 18/31 Rpt: 50/63	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Texans for Reasonable Solutions PAC 00088502
	l .
4 Date	5 Payee name
12/11/2024	Joanne Shofner Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	638 N. University Drive #177
Expenditure from corporate funds	Nacogdoches, TX 75961
8 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   Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Campaign Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	
Date	Payee name
12/11/2024	Joe Moody Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 920827
Expenditure from corporate funds	El Paso, TX 79902
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
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	· ·
Data	
Date	Payee name
12/06/2024	John McQueeney Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	P.O. Box 100458
— Forestelliture from	
Expenditure from corporate funds	Fort Worth, TX 76185
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By  Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	<del>1</del>

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ 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
OTHER (enter a category not listed above)

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: 19/31 Rpt: 51/63	Texans for Reasonable Solutions PAC 00088502
4 Date	5 Payee name
12/11/2024	Jon Rosenthal Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	8624 Highway 6 N. #340
Expenditure from corporate funds	Houston, TX 77064
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
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete ONLY if direct expenditure to benefit C/OI	
Date	Payee name
12/11/2024	Katrina Pierson Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	609 Goliad St. #672
Expenditure from	
corporate funds	Rockwall, TX 75087
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
	Campaign Continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/11/2024	Keith Bell Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 1178
Expenditure from	
corporate funds	Forney, TX 75126
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
	Sampaigh Continuation
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 -

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

Candidate/Officenoider/Politica 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: 20/31 Rpt: 52/63	Texans for Reasonable Solutions PAC 00088502
4 Date	5 Payee name
12/11/2024	Ken King Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	P.O. Box 1202
Expenditure from corporate funds	Canadian, TX 79014-1202
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.  Check if Austin TV office holder living purposes
	Candidate/Officeholder/Political Committee Campaign Contribution
	Campaign Continuation
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/11/2024	Keresa Richardson Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	P.O. Box 1179
Ψ000.00	1.0. 50% 1110
Expenditure from corporate funds	McKinney, TX 75070
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
	Campaign Contribution
Operation ONE Wife discont	Out tidate (Office health are reserved.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/12/2024	Lacy Hull Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$750.00	PO Box 19231
Expenditure from	
corporate funds	Houston, TX 77224
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 travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	- Campaign Continuation
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 Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

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: 21/31 Rpt: 53/63	Texans for Reasonable Solutions PAC 00088502
4 Date	5 Payee name
12/11/2024	Marc Lahood Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	127 Encino Blanco
Expenditure from	
corporate funds	San Antonio, TX 78232
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to benefit 6/61	'
Date	Payee name
12/11/2024	Matt Morgan Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	503 FM 359 #264, Ste. 130 #226
Expenditure from corporate funds	Richmond, TX 77406
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
	Campaign Continuution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Power name
12/13/2024	Payee name  Matt Morgan Campaign
	Matt Morgan Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	503 FM 359 #264, Ste. 130 #226
Expenditure from	
corporate funds	Richmond, TX 77406
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
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to beliefft G/OI	•

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi 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	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 22/31 Rpt: 54/63	Texans for Reasonable Solutions PAC 00088502
4 Date	5 Payee name
12/12/2024	Mayes Middleton Campaign
6 Amount (\$) \$3,500.00	7 Payee address; City; State; Zip Code P.O. Box 1526
\$3,500.00	F.O. BOX 1320
Expenditure from corporate funds	Galveston, TX 77553
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
	Campaign Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/11/2024	Mitch Little Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	2841 Seven Shields Lane
Expenditure from corporate funds	Lewisville, TX 75056
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
_/	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	· ·
Date	Payee name
12/12/2024	Molly Cook Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 667238
Expenditure from corporate funds	Houston, TX 77266
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
	Campaign Contribution
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 Committee

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	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 23/31 Rpt: 55/63	2 FILER NAME3 Filer ID(Ethics Commission Filers)Texans for Reasonable Solutions PAC00088502
4 Date	5 Payee name
12/11/2024	Morgan Meyer Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	3838 Oak Lawn Ave., Ste. 400
Expenditure from corporate funds	Dallas, TX 75219
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
	Campaigh Continuation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to beliefft C/O	
Date	Payee name
12/11/2024	Oscar Longoria Campaign
Amount (\$)	Payee address; City; State; Zip Code
` '	
\$1,000.00	P.O. Box 4224
Expenditure from	
corporate funds	Mission, TX 78573
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
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	-l
Date	Payee name
12/06/2024	Pat Curry Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	204 Woodhew Drive
Expenditure from corporate funds	Waco, TX 76712
-	1
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Contributions/Donations Made By  Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign Continuation
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
CAPCHARLINE TO DETICITE C/OI	•

### SCHEDULE F1

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

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

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	
1 Total pages Schedule F1: Sch: 24/31 Rpt: 56/63	2 FILER NAME Texans for Reasonable Solutions PAC  3 Filer ID (Ethics Commission Filers) 00088502
4 Date	5 Payee name
12/06/2024	Paul Dyson for Texas
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	4040 State Highway 6 S, Ste 200
Expenditure from corporate funds	College Station, TX 77845
	1
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  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Campaigh Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to benefit 6/01	•
Date	Payee name
12/11/2024	Philip Cortez Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	
\$250.00	7919 Liberty Island
Expenditure from	
corporate funds	San Antonio, TX 78227-4734
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Davisa nama
12/11/2024	Payee name
12/11/2024	Rafael Anchia Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 4468
Funanditure from	
Expenditure from corporate funds	Dallas, TX 75208
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 Check if Austin, TX, officeholder living expense
	Campaign 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 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 complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 25/31 Rpt: 57/63	Texans for Reasonable Solutions PAC 00088502
4 Date	5 Payee name
12/11/2024	Ramon Romero Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$750.00	PO BOX 181
Expenditure from corporate funds	Fort Worth, TX 76101
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
	Campaign Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u> </u>	
Date	Payee name
12/11/2024	Ron Reynolds Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$700.00	6140 Hwy. 6 South, Ste. 233
Expenditure from	
corporate funds	Missouri City, TX 77459-3802
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
	Campaign Continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	-1
Date	Payee name
12/12/2024	Royce West Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	320 S R.L. Thornton Fwy
+=,5:3:00	
Expenditure from corporate funds	Dallas, TX 75203-1804
PURPOSE	
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
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to beliefit C/O	'

### 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

**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 (pater 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 26/31 Rpt: 58/63	Texans for Reasonable Solutions PAC 00088502
4 Date	5 Payee name
11/26/2024	Ryan Guillen Campaign
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code P.O. Box 1024
Expenditure from corporate funds	Austin, TX 78767
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
ZA ZHBITORZ	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/11/2024	Sarah Eckhardt Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 301586
Expenditure from corporate funds	Austin, TX 78703
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
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/12/2024	Senator Phil King Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. 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
LA LADITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
1	

### SCHEDULE F1

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

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

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 Tatalya aya Cabadyla 54	·
1 Total pages Schedule F1: Sch: 27/31 Rpt: 59/63	2 FILER NAME3 Filer ID(Ethics Commission Filers)Texans for Reasonable Solutions PAC00088502
4 Date	5 Payee name
12/06/2024	Shelley Luther Campaign
6 Amount (\$) \$750.00	<ul><li>7 Payee address; City; State; Zip Code</li><li>587 White Mound Rd.</li></ul>
·	
Expenditure from corporate funds	Sherman, TX 75090
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
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/13/2024	Texas House Republican Caucus PAC
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 13305
Ψ1,000.00	1 101 BOX 10000
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
LAI LIIDITORE	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/11/2024	Todd Hunter Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,250.00	445 Cape Henry
Expenditure from	
corporate funds	Corpus Christi, TX 78412
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
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 Co 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 7 1 0 1 1 5	,
1 Total pages Schedule F1:	
Sch: 28/31 Rpt: 60/63	Texans for Reasonable Solutions PAC 00088502
4 Date	5 Payee name
10/29/2024	Trey Martinez Fischer Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	104 Babcock Road, Suite 107
<del>+</del> =,000.00	
Expenditure from	0 4 1 7 77 70004
corporate funds	San Antonio, TX 78201
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
	Campaign Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to benefit 6/01	•
Date	Payee name
12/11/2024	Trey Wharton Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 1242
Ψ000.00	1 0 50% 1242
Expenditure from	
corporate funds	Huntsville, TX 77342
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
-	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialture to beliefit C/O	
Date	Payee name
12/12/2024	Valoree Swanson Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	23020 Ammick Ct.
Ψ300.00	
Expenditure from	O. iv. TV 77000
corporate funds	Spring, TX 77389
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/OI	1

### 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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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: 29/31 Rpt: 61/63	Texans for Reasonable Solutions PAC 00088502			
4 Date	5 Payee name			
11/18/2024	Vantage Compliance			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$960.00	PO Box 341027			
Expenditure from corporate funds	Austin, TX 78734			
8 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			
	Compliance Consulting			
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
11/18/2024	Vantage Compliance			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,020.00	PO Box 341027			
Expenditure from				
corporate funds	Austin, TX 78734			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.			
EXI ENDITORE	Check if Austin, TX, officeholder living expense			
	Compliance Consulting			
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				
Date	Payee name			
12/06/2024	Vantage Compliance			
Amount (\$)	Payee address; City; State; Zip Code			
\$720.00	PO Box 341027			
Expenditure from				
corporate funds	Austin, TX 78734			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.			
	Check if Austin, TX, officeholder living expense			
	Compliance Consulting			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OH				

## 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 complete this form.				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission	n Filers)			
Sch: 30/31 Rpt: 62/63	Texans for Reasonable Solutions PAC 00088502				
4 Date	5 Payee name				
11/18/2024	Vantage Legal				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$538.50					
,,,,,,					
Expenditure from corporate funds	Austin, TX 78734				
·					
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Legal Services  Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
	Legal Consulting				
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/O	expenditure to benefit C/OH				
Date	Payee name				
11/18/2024	Vantage Legal				
Amount (\$)	Payee address; City; State; Zip Code				
\$1,543.50					
Ψ2,0 10.00	1 0 50X 0 12020				
Expenditure from	Auctin TV 79724				
corporate funds	Austin, TX 78734				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Taxes Complete Schedule T				
EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
	Legal Consulting				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/O	expenditure to benefit C/OH				
Date	Payee name				
11/18/2024	Vantage Legal				
Amount (\$)	Payee address; City; State; Zip Code				
\$2,000.00					
Ψ2,000.00					
Expenditure from	Austin TV 78734				
corporate funds	Austin, TX 78734				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Legal Services  Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
	Legal Consulting				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/OH					

## SCHEDULE F1

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

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
	Sch: 31/31 Rpt: 63/63	Texans for Reasonable Solutions PAC	00088502	
4	Date	5 Payee name	<u> </u>	
	12/11/2024	Vikki Goodwin Campaign		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$500.00	3701 Shady Valley Dr.		
	Expenditure from corporate funds	Austin, TX 78739		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Continuous in Nadae By	outside of Texas. Complete Schedule T. , TX, officeholder living expense	
		Campaign Co		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	12/11/2024	Vincent Perez Campaign		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$500.00	649 Londonderry Road		
	Expenditure from corporate funds	El Paso, TX 79907		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Continuations/Portations Wade By	outside of Texas. Complete Schedule T. , TX, officeholder living expense	
		Candidate/Officeholder/Political Committee		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	12/11/2024	Wes Virdell Campaign		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$500.00	PO Box 147		
_	■ Expenditure from			
	corporate funds	Brady, TX 76825		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Contributions/Donations Made By	outside of Texas. Complete Schedule T. , TX, officeholder living expense	
		Candidate/Officeholder/Political Committee Campaign Compaign Compa		
		_ sunpaign of		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held	
expenditure to benefit C/OH				