### GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

# FORM GPAC COVER SHEET PG 1

т٢	e GPAC Instruction	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00088252	2 Total pages filed: 19
3	COMMITTEE NAME			OFFICE USE ONLY
	Texans United for	a Conservative Majority PAC		Date Received
				ELECTRONICALLY FILED
				01/15/2025
	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; CIT	Y; STATE; ZIP CODE	01/10/2020
<b> </b>	ADDRESS	PO Box 121038	T, STATE, ZIFCODE	
	_			Date Hand-delivered or Date Postmarked
	X Change of Address	Fort Worth, TX 76121		Receipt # Amount
				Receipt # Amount
				Date Processed
				Date Imaged
5	CAMPAIGN TREASURER	MS / MRS / MR FIRST		MI
	NAME	Justin		
		NICKNAME LAST		SUFFIX
		Maloney		
6	CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY;	STATE; ZIP CODE
	STREET	451 Meadow PI. Drive		
	ADDRESS			
	(Residence or Business)	Willow Park, TX 76087		
7		STREET OR PO BOX;	APT / SUITE #; CITY	STATE; ZIP CODE
	TREASURER MAILING	PO Box 121038		
	ADDRESS			
	X Change of Address	Fort Worth, TX 76121		
8	CAMPAIGN	AREA CODE PHONE NUMBER E	EXTENSION	
ľ	TREASURER	(682) 267-8457		
	PHONE			
9	REPORT	X January 15 30	th day before election	Dissolution (Attach PAC-DR)
	TYPE			
		ا الله الله الله الله الله الله الله ال	n day before election	10th day after campaign treasurer termination
			inoff	
10	PERIOD	Month Day Year	Month Day	Year
	COVERED	-	IROUGH 12/31/2024	1
11	ELECTION	ELECTION DATE	ELECTION TYPE	
		Month Day Year	rimary Runoff	Other
		G	eneral Special	
			_	
		· · · · · · · · · · · · · · · · · · ·		
		GO 1	O PAGE 2	
Fo	rms provided by Tex	kas Ethics Commission www.et	hics.state.tx.us	Version V4.1.0.5dd2ace2

### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texans United for a Co	nservative Majority PAC	2	000882	52
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Janie Lopez 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.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	34,426.76
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	346,581.92
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	100,505.68
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			ľ	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
			Maloney	
		Signature of Ca	npaign Trea	asurer
AFFIX NOTARY	STAMP / SEAL ABOVE			
		, tł	nis the	day
of	, 20, to certify v	vhich, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of c	officer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.5dd2ace2

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

### FORM GPAC

Page 3 of 19

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texans United for a Co	nservative Majority P	AC		00088252	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Adam Hinojosa 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	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Steve Kinard 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 ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Andy Hopper 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			

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

### FORM GPAC

Page 4 of 19

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texans United for a Co	nservative Majority P	AC		00088252	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Katrina Pierson 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		A Cunnerted	Deniel Alders, Otata D.	ti ve	
ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Daniel Alders State Representat	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	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	David Lowe 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			
	3. Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				Varian V4.1.0 Edd2aac2

### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

### FORM GPAC

				Page 5 of 19
12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texans United for a Conservati	ve Majority PAC		00088252	
14 COMMITTEE 1. Can ACTIVITY (Identify b applicable	didates A. Supported J( y name or, if , classify by party.)	on Bouche State Representativ	e	
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed			
2. Mea	sures A. Supported			
(Describe location of nature of i	by date and election and ssue.)			
	B. Opposed			
Assi	eholders sted			
applicable	y name or, if , classify by party.)			

### SUBTOTALS - GPAC

## FORM GPAC COVER SHEET PG 3

6 of 19

17 COMMITTE	17 COMMITTEE NAME 18 Filer ID (I						
	Texans United for a Conservative Majority PAC     00088252       L9 SCHEDULE SUBTOTALS     00088252						
19 SCHEDULI NAME OF	SUBTOTAL AMOUNT						
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 34,426.76				
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$				
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$				
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	IR	\$				
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA 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 C	ORGANIZATION	\$				
9.	SCHEDULE E: LOANS		\$				
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	<b>\$</b> 346,581.92				
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 CONTRIBUTIO	ONS	\$				
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$				

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 1/5 Rpt: 7/19
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	ed for a Conservative Majority PAC		00088252
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
11/13/2024	Applewhite, Bill		\$100.0
	6 Contributor address; City; State; Zip Code		
	Grapevine, TX 76051		
	ipation / Job title (See Instructions)	9 Employer (See Instructions	3)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
11/12/2024	Archibald, Penny		\$25.0
	Contributor address; City; State; Zip Code		1
D in sin al asso	Lampasas, TX 76550		Į
Principal occu Retired	ipation / Job title (See Instructions)	Employer (See Instructions Retired	\$)
Date		)	Amount of Contribution (\$)
12/12/2024			\$25.0
	Contributor address; City; State; Zip Code		
	Lampasas, TX 76550		
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۶)
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
11/08/2024	Bates, Brett		\$50.0
	Contributor address; City; State; Zip Code		1
Duits singly approx	Dallas, TX 75218		Į
Principal occu Retired	ipation / Job title (See Instructions)	Employer (See Instructions Retired	3)
	<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$) \$17.7
11/21/2024	Bermudez, John		φ⊥ι.ι
	Contributor address; City; State; Zip Code		
	Katy, TX 77449		
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Retired		Retired	

Texans United for a Conservative Majority PAC   00088252	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/5 Rpt: 8/19	
4       Date 11/27/2024       5       Full name of contributor Blackshear, Robert       7       Amount of Contribution (\$) 5       \$5,00         6       Contributor address; City; State; Zip Code Huntsville, TX 77340       9       Employer (See Instructions) Retired       7       Amount of Contribution (\$) \$5,00         8       Full name of contributor 12/09/2024       Full name of contributor Braddock, Sidney Contributor address; City; State; Zip Code Odessa, TX 79762       Amount of Contribution (\$) \$50,00       Amount of Contribution (\$) \$50,00         Principal occupation / Job title (See Instructions) Retired       Full name of contributor Odessa, TX 79762       Employer (See Instructions) Odessa, TX 79762       Amount of Contribution (\$) \$50,00         Principal occupation / Job title (See Instructions) Physical Therapist       Employer (See Instructions) Optimus Physical Therapy       Amount of Contribution (\$) \$25,00         Date 12/06/2024       Full name of contributor Contributor address: City: State: Zip Code Mont Belvieu, TX 77580       Employer (See Instructions) Retired       Amount of Contribution (\$) \$250,00         Principal occupation / Job title (See Instructions) Consultant       Full name of contributor Contributor address; City: State; Zip Code Spicewood, TX 78669       Employer (See Instructions) Self Employed       Amount of Contribution (\$) \$50,000,00         Date 11/13/2024       Full name of contributor Contributor address: City: State; Zip Code Contributor address: City: State; Zip Code       Amount of Contribution (\$) \$50,000	2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
11/27/2024       Blackshear, Robert       \$5,00         6       Contributor address; City; State; Zip Code       Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)         Retired       Full name of contributor       out-of-state PAC (DP:	Texans Unit	ed for a Conservative Majority PAC			00088252	
6       Contributor address; City; State; Zip Code         Huntsville, TX 77340       9         8       Principal occupation / Job title (See Instructions) Retired       9         Date 12/09/2024       Full name of contributor out-of-state PAC (De:) Braddock, Sidney       Amount of Contribution (\$) Braddock, Sidney         Odessa, TX 79762       Contributor address; City; State; Zip Code       Amount of Contribution (\$) Contributor address; City; State; Zip Code         Principal occupation / Job title (See Instructions) Physical Therapist       Employer (See Instructions) Optimus Physical Therapy         Date 12/06/2024       Full name of contributor out-of-state PAC (DI:) Amount of Contribution (\$) Contributor address; City; State; Zip Code       Amount of Contribution (\$) S25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) S25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) S250.00         Date 11/08/2024       Full name of contributor out-of-state PAC (DI:) Spicewood, TX 78669       Amount of Contribution (\$) S250.00         Principal occupation / Job title (See Instructions) Consultant       Employer (See Instructions) Self Employed       Amount of Contribution (\$) S5,000.00         Date 11/13/2024       Full name of contributor	4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
6       Contributor address: City: State: Zip Code         Huntsville, TX 77340       Principal occupation / Job title (See Instructions) Retired         Date       Full name of contributor out-of-state PAC (De:	11/27/2024					\$5.00
8       Principal occupation / Job title (See Instructions) Retired       9       Employer (See Instructions) Retired         Date 12/09/2024       Full name of contributor out-of-state PAC (Der) Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$\$0.00         Date 12/09/2024       Full name of contributor Odessa, TX 79762       Employer (See Instructions) Optimus Physical Therapy       Amount of Contribution (\$) \$\$25.00         Principal occupation / Job title (See Instructions) Physical Therapist       Eul name of contributor out-ot-state PAC (Der) Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$\$25.00         Date 12/06/2024       Full name of contributor Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$\$25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$\$250.00         Date 11/08/2024       Full name of contributor out-ot-state PAC (Der) Spicewood, TX 78669       Amount of Contribution (\$) \$\$250.00         Principal occupation / Job title (See Instructions) Consultant       Employer (See Instructions) Self Employed       Amount of Contribution (\$) \$\$5,000.00         Date 11/13/2024       Full name of contributor				1		
8       Principal occupation / Job title (See Instructions) Retired       9       Employer (See Instructions) Retired         Date 12/09/2024       Full name of contributor out-of-state PAC (Der) Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$\$0.00         Date 12/09/2024       Full name of contributor Odessa, TX 79762       Employer (See Instructions) Optimus Physical Therapy       Amount of Contribution (\$) \$\$25.00         Principal occupation / Job title (See Instructions) Physical Therapist       Eul name of contributor out-ot-state PAC (Der) Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$\$25.00         Date 12/06/2024       Full name of contributor Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$\$25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) \$\$250.00         Date 11/08/2024       Full name of contributor out-ot-state PAC (Der) Spicewood, TX 78669       Amount of Contribution (\$) \$\$250.00         Principal occupation / Job title (See Instructions) Consultant       Employer (See Instructions) Self Employed       Amount of Contribution (\$) \$\$5,000.00         Date 11/13/2024       Full name of contributor						
Retired       Retired         Date 12/09/2024       Full name of contributor Braddock, Sidney       out-of-state PAC (DF:) Grandbock, Sidney       Amount of Contribution (\$) S50.00         12/09/2024       Braddock, Sidney       Employer (See Instructions) Optimus Physical Therapy       Amount of Contribution (\$) S25.00         Principal occupation / Job title (See Instructions) Physical Therapist       Employer (See Instructions) Optimus Physical Therapy       Amount of Contribution (\$) S25.00         Date 12/06/2024       Full name of contributor Contributor address; City; State; Zip Code       Amount of Contribution (\$) Mont Belvieu, TX 77580       Amount of Contribution (\$) S25.00         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired       Amount of Contribution (\$) S25.00         Date 11/08/2024       Full name of contributor Contributor address; City; State; Zip Code       Employer (See Instructions) Retired       Amount of Contribution (\$) S250.00         Principal occupation / Job title (See Instructions) Spicewood, TX 78669       Employer (See Instructions) Self Employed       Amount of Contribution (\$) S250.00         Principal occupation / Job title (See Instructions) Consultant       Employer (See Instructions) Self Employed       Amount of Contribution (\$) S5,000.00         Date 11/13/2024       Full name of contributor Contributor address; City; State; Zip Code       Amount of Contribution (\$) S5,000.00         Contributor address; City; State; Zi						
12/09/2024       Braddock, Sidney       \$50.00         Contributor address; City, State; Zip Code       Contributor address; City, State; Zip Code       State; Zip Code         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Optimus Physical Therapy         Date       Full name of contributor       out-of-state PAC (IDE:       Amount of Contribution (\$)         12/06/2024       Cairns, John       State; Zip Code       Amount of Contribution (\$)         12/06/2024       Cairns, John       Employer (See Instructions)       State; Zip Code         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       State; Zip Code         Principal occupation / Job title (See Instructions)       Retired       Amount of Contribution (\$)       State; Zip Code         Date       Full name of contributor		ipation / Job title (See Instructions)		s)		
Contributor address; City; State; Zip Code         Odessa, TX 79762         Principal occupation / Job title (See Instructions)         Physical Therapist         Date         12/06/2024         Cairns, John         Contributor address; City; State; Zip Code         Mont Belvieu, TX 77580         Principal occupation / Job title (See Instructions)         Contributor address; City; State; Zip Code         Mont Belvieu, TX 77580         Principal occupation / Job title (See Instructions)         Retired         Date         Full name of contributor         Out-of-state PAC (ID#:         Mont Belvieu, TX 77580         Employer (See Instructions)         Retired         Date         Full name of contributor         Out-of-state PAC (ID#:         Amount of Contribution (\$)         Spicewood, TX 78669         Principal occupation / Job title (See Instructions)         Self Employed         Contributor address; City, State; Zip Code         Spicewood, TX 78669         Pate         Full name of contributor         Out-of-state PAC (ID#:         11/13/2024         CyFair 4 Liberty PAC         Contributor address; City, St	Date	Full name of contributor out-of-state PAC (ID#:_	)	T	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code          Odessa, TX 79762       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Optimus Physical Therapist       Optimus Physical Therapy         Date       Full name of contributor out-of-state PAC (ID#;)       Amount of Contribution (\$)         12/06/2024       Cairns, John          Contributor address; City, State; Zip Code          Mont Belvieu, TX 77580       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Retired         Date       Full name of contributor out-of-state PAC (ID#;	12/09/2024					\$50.00
Principal occupation / Job title (See Instructions) Physical Therapist       Employer (See Instructions) Optimus Physical Therapy         Date       Full name of contributor       out-of-state PAC (ID#:		Contributor address; City; State; Zip Code		1		
Principal occupation / Job title (See Instructions) Physical Therapist       Employer (See Instructions) Optimus Physical Therapy         Date       Full name of contributor       out-of-state PAC (ID#:						
Principal occupation / Job title (See Instructions) Physical Therapist       Employer (See Instructions) Optimus Physical Therapy         Date       Full name of contributor       out-of-state PAC (ID#:		Odessa, TX 79762				
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         12/06/2024       Cairns, John       \$25.00         Contributor address; City; State; Zip Code       Mont Belvieu, TX 77580       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Retired         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         11/08/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         11/08/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Spicewood, TX 78669       Employer (See Instructions)       \$250.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$250.00         Consultant       Employer (See Instructions)       \$250.00       \$250.00         Date       Full name of contributor       out-of-state PAC (ID#:	Principal occu		Employer (See Instructions	<u> </u>		
12/06/2024       Cairns, John       \$25.00         Contributor address; City, State; Zip Code       Mont Belvieu, TX 77580       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Retired         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$250.00         11/08/2024       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$250.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$250.00         Spicewood, TX 78669       Employer (See Instructions)       \$250.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$250.00         Consultant       Guitor	Physical The	erapist	Optimus Physical Thera	ару		
Contributor address; City; State; Zip Code       Mont Belvieu, TX 77580         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Date       Full name of contributor out-of-state PAC (ID#:) Calvin, Wylie       Amount of Contribution (\$) Calvin, Wylie         11/08/2024       Full name of contributor out-of-state PAC (ID#:) Calvin, Wylie       Amount of Contribution (\$) \$250.00         Principal occupation / Job title (See Instructions) Contributor address; City; State; Zip Code       Employer (See Instructions) Self Employed         Principal occupation / Job title (See Instructions) Consultant       Employer (See Instructions) Self Employed       Amount of Contribution (\$) \$5,000.00         Date       Full name of contributor out-of-state PAC (ID#:) (CyFair 4 Liberty PAC       Amount of Contribution (\$) \$5,000.00         11/13/2024       Full name of contributor out-of-state PAC (ID#:) (Cypress, TX 77429       Amount of Contribution (\$)	Date	Full name of contributor out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
Mont Belvieu, TX 77580       Employer (See Instructions) Retired         Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Date       Full name of contributor out-of-state PAC (ID#:) Calvin, Wylie       Amount of Contribution (\$) \$250.00         11/08/2024       Full name of contributor out-of-state PAC (ID#:) Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$250.00         Principal occupation / Job title (See Instructions) Consultant       Employer (See Instructions) Self Employed       Amount of Contribution (\$) \$250.00         Date       Full name of contributor out-of-state PAC (ID#:) 11/13/2024       Amount of Contribution (\$) CyFair 4 Liberty PAC         Date       Full name of contributor out-of-state PAC (ID#:) Contributor address; City; State; Zip Code       Amount of Contribution (\$) S5,000.00         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       Amount of Contribution (\$)	12/06/2024					\$25.00
Principal occupation / Job title (See Instructions) Retired       Employer (See Instructions) Retired         Date       Full name of contributorout-of-state PAC (ID#:) Calvin, Wylie       Amount of Contribution (\$) \$250.00         11/08/2024       Calvin, Wylie       \$250.00         Contributor address; City; State; Zip Code       Spicewood, TX 78669         Principal occupation / Job title (See Instructions) Consultant       Employer (See Instructions) Self Employed         Date       Full name of contributorout-of-state PAC (ID#:) CyFair 4 Liberty PAC       Amount of Contribution (\$) \$5,000.00         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Date       Full name of contributorout-of-state PAC (ID#:) Cypress, TX 77429       Amount of Contribution (\$)		Contributor address; City; State; Zip Code		·		
Retired       Retired         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         11/08/2024       Calvin, Wylie       \$250.00         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       \$250.00         Spicewood, TX 78669       Employer (See Instructions)       Full name of contributor       Self Employed         Principal occurre       Self Employed       Self Employed       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         11/13/2024       CyFair 4 Liberty PAC       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Cypress, TX 77429       Cupress, TX 77429       Amount of Contribution (\$)						
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         11/08/2024       Calvin, Wylie       \$250.00         Contributor address; City; State; Zip Code       Spicewood, TX 78669         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Consultant       Self Employed         Date       Full name of contributor         11/13/2024       CyFair 4 Liberty PAC         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Cypress, TX 77429       Cupress, TX 77429		pation / Job title (See Instructions)		s)		
11/08/2024       Calvin, Wylie       \$250.00         Contributor address; City; State; Zip Code       \$250.00         Spicewood, TX 78669       Employer (See Instructions)         Consultant       Employer (See Instructions)         Consultant       Self Employed         Date       Full name of contributor       out-of-state PAC (ID#:)         11/13/2024       CyFair 4 Liberty PAC       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       \$5,000.00         Cypress, TX 77429       Lot Liberty PAC	Retired		Retired			
Contributor address; City; State; Zip Code Spicewood, TX 78669 Principal occupation / Job title (See Instructions) Consultant Date Date CyFair 4 Liberty PAC Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code Cypress, TX 77429			)	Τ	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code       Spicewood, TX 78669         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Consultant       Employer (See Instructions)         Date       Full name of contributor out-of-state PAC (ID#:)         11/13/2024       CyFair 4 Liberty PAC         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Cypress, TX 77429       Liberty PAC	11/08/2024	-				\$250.00
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Consultant       Self Employed         Date       Full name of contributor out-of-state PAC (ID#:)         11/13/2024       CyFair 4 Liberty PAC         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Cypress, TX 77429       Cupress, TX 77429				]		
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Consultant       Self Employed         Date       Full name of contributor out-of-state PAC (ID#:)         11/13/2024       CyFair 4 Liberty PAC         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Cypress, TX 77429       Cupress, TX 77429						
Consultant     Self Employed       Date     Full name of contributor     out-of-state PAC (ID#:)       11/13/2024     CyFair 4 Liberty PAC     Amount of Contribution (\$)       Contributor address; City; State; Zip Code     \$5,000.00       Cypress, TX 77429     Cypress, TX 77429		Spicewood, TX 78669				
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         11/13/2024       CyFair 4 Liberty PAC       \$5,000.00         Contributor address; City; State; Zip Code       \$5,000.00         Cypress, TX 77429       Cupress, TX 77429	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
11/13/2024       CyFair 4 Liberty PAC       \$5,000.00         Contributor address; City; State; Zip Code       Cypress, TX 77429	Consultant		Self Employed			
Contributor address; City; State; Zip Code Cypress, TX 77429	Date	Full name of contributor out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
Cypress, TX 77429	11/13/2024	CyFair 4 Liberty PAC				\$5,000.00
		Contributor address; City; State; Zip Code		"		
		Cvdress, TX 77429				
	Principal occu		Employer (See Instructions	<u> </u>		
	p			-,		

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/5 Rpt: 9/19	
2	FILER NAME				Filer ID (Ethics Commission	on Filers)
2		ed for a Conservative Majority PAC			00088252	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	12/19/2024	Ellisor, Sue				\$10.00
		6 Contributor address; City; State; Zip Code		·		
		Conroe, TX 77304				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	11/13/2024	Fite, Ralph				\$1,000.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77042				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	SVP-Finance	e	Welcome Group, LLC			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	11/12/2024	Harper, Steven				\$10.00
		Contributor address; City; State; Zip Code				
		Bulverde, TX 78163				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	11/25/2024	Hawkins, James				\$50.00
		Contributor address; City; State; Zip Code				
		Abilene, TX 79606				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	11/29/2024	Henderson, Cecelia				\$50.00
		Contributor address; City; State; Zip Code				
		Freer, TX 78357				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			

-				
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 4/5 Rpt: 10/19
2	FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
ľ		ed for a Conservative Majority PAC		00088252
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
	11/13/2024	Huffines, Phillip		\$25,000.0
		6 Contributor address; City; State; Zip Code		
		Dallas, TX 75225		
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)
	Real Estate		Huffines Communities	
	Date	Full name of contributor Dut-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	12/14/2024	Humphrey, Rob		\$50.0
		Contributor address; City; State; Zip Code		
		Elgin, TX 78621		
	-	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Executive		Texas	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	11/11/2024	Kopplow, Kenneth		\$50.0
		Contributor address; City; State; Zip Code		
		Seguin, TX 78155		
		pation / Job title (See Instructions)	Employer (See Instructions	s)
	Retired		Retired	
	Date	Full name of contributor 🔲 out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
	12/06/2024	McGuirt, Don		\$25.0
		Contributor address; City; State; Zip Code		
		Houston, TX 77042		
		pation / Job title (See Instructions)	Employer (See Instructions	S)
	Retired		Retired	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	11/11/2024	McManus, Jeffrey		\$2,500.0
		Contributor address; City; State; Zip Code		
		San Antonio, TX 78209		
		pation / Job title (See Instructions)	Employer (See Instructions	s)
	Retired		Retired	

ction Guide explains how to complete th	s form.	1 Total pages Schedule A1: Sch: 5/5 Rpt: 11/19
ed for a Conservative Majority PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00088252
Shaw, Stuart		7 Amount of Contribution (\$) \$100.0
6 Contributor address; City; State; Zip Code Austin, TX 78735		
pation / Job title (See Instructions)	9 Employer (See Instruction Bonner Carrington	ns)
Eull name of contributor		Amount of Contribution (\$)
	D#)	
		\$9.0
Contributor address; City; State; Zip Code Houston, TX 77025		
pation / Job title (See Instructions)	Employer (See Instruction	ns)
	Retired	
	D#:)	Amount of Contribution (\$)
Contributor address; City; State; Zip Code		 \$25.0
	Employer (See Instruction	ns)
	ed for a Conservative Majority PAC   5 Full name of contributor   out-of-state PAC (II   Shaw, Stuart   6 Contributor address; City; State; Zip Code   Austin, TX 78735   pation / Job title (See Instructions)   Full name of contributor   out-of-state PAC (II   Vance, Paula   Contributor address; City; State; Zip Code   Houston, TX 77025   pation / Job title (See Instructions)   Full name of contributor   out-of-state PAC (II   Withers, Doug	5       Full name of contributor       out-of-state PAC (ID#:)         Shaw, Stuart       6       Contributor address; City; State; Zip Code         Austin, TX 78735       9       Employer (See Instruction Bonner Carrington         Full name of contributor       out-of-state PAC (ID#:)       Vance, Paula         Contributor address; City; State; Zip Code

Advertising Expense Accounting/Banking Consulting 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: 1/8 Rpt: 12/19	Texans United for a Conservative Majority PAC     00088252		
4 Date	5 Payee name		
10/31/2024	Adam Hinojosa Campaign		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$15,000.00	PO Box 18301		
Expenditure from corporate funds	Corpus Christi, TX 78480		
8 PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense Campaign Contribution</li> </ul> </li> </ul>		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
11/05/2024	Andy Hopper Campaign		
Amount (\$)	Payee address; City; State; Zip Code		
\$17,500.00	1581 CR 2224		
Expenditure from corporate funds	Decatur, TX 76244		
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense Campaign Contribution</li> </ul> </li> </ul>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
11/05/2024	Ascend LLC		
Amount (\$)	Payee address; City; State; Zip Code		
\$13,500.00	3211 English Way		
Expenditure from corporate funds	Prospect, KY 40059		
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Polling Expense</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Voter Research</li> </ul> </li> </ul>		
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held		

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		se Transportation Equipment & Related Expense 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: 2/8 Rpt: 13/19	Texans United for a Conservative Majority PAC	00088252
4 Date	5 Payee name	•
12/11/2024	Daniel Alders Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$5,000.00	PO Box 8907	
Expenditure from corporate funds	Tyler, TX 75711	
8 PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	avel outside of Texas. Complete Schedule T. austin, TX, officeholder living expense Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
12/12/2024	David Lowe Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$7,500.00	7424 Park Place Dr	
Expenditure from corporate funds	North Richland Hillds, TX 76182	
PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	n avel outside of Texas. Complete Schedule T. .ustin, TX, officeholder living expense n Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
10/30/2024	Direct Texas LLC	
Amount (\$)	Payee address; City; State; Zip Code	
\$33,854.43	PO Box 78201	
Expenditure from corporate funds	San Antonio, TX 78201	
PURPOSE OF EXPENDITURE	Check if A	avel outside of Texas. Complete Schedule T. avel outside of Texas. Complete Schedule T. austin, TX, officeholder living expense O 34 and HD 121
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Villalobos, Denise State Representative D	Office held District 34

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting 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: 3/8 Rpt: 14/19	Texans United for a Conservative Majority PAC 00088252	
4 Date	5 Payee name (see previous)	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder nameOffice soughtOffice heldILaHood, MarcState Representative District 121	
Date	Payee name	
10/28/2024	Janie Lopez Campaign	
Amount (\$) \$7,500.00	Payee address; City; State; Zip Code PO Box 2073	
Expenditure from corporate funds	San Benito, TX 78586	
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Campaign Contribution</li> </ul> </li> </ul>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
12/16/2024	Jon Bouche Campaign	
Amount (\$) \$5,000.00	Payee address;     City;     State;     Zip Code       7127 Silverleaf Oak Street	
Expenditure from corporate funds	Conroe, TX 77304	
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense Campaign Contribution</li> </ul> </li> </ul>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expen Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense		Transportation E Travel in District Travel Out of Di	Solicitation/Fundraising Expense Transportation Equipment & Related Expense 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: 4/8 Rpt: 15/19		Texans United for a Conservative Majority PAC 00088252					
4 Date	5 Payee name						
11/10/2024	Katrina Pie	rson Campaign					
6 Amount (\$)	7 Payee addre	7 Payee address; City; State; Zip Code					
\$1,000.00	609 S Golli	ad St. 672					
Expenditure from corporate funds	Rockwall, T	X 75087					
8 PURPOSE	(a) Category (S	ee Categories listed at the top	of this schedule)	(b) Description			
OF EXPENDITURE		ns/Donations Made E Officeholder/Political			outside of Texas. Com a, TX, officeholder living Ontributions		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		iceholder name	Office sou	ght	Office h	eld	
Date	Payee name						
10/28/2024	Peerly Inc.						
Amount (\$)	Payee addre	ss; City;	State; Zip Co	de			
\$15,000.00	2232 Dell F	-	ошю, _р ос				
φ13,000.00		ange ru.					
Expenditure from corporate funds	STE 287 Cheyenne,	WY 82009					
PURPOSE OF EXPENDITURE	(a) Category <sub>(S</sub> Advertising	ee Categories listed at the top Expense	of this schedule)	Check if Austin	outside of Texas. Com n, TX, officeholder livin ng Texting Cre	g expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/O		ceholder name	Office sou	ght	Office h	eld	
Date	Payee name						
11/11/2024	Peerly Inc.						
Amount (\$)	Payee addre	ss; City;	State; Zip Co	de			
\$26,000.00	2232 Dell F						
	STE 287	-					
Expenditure from corporate funds	Cheyenne,	WY 82009					
PURPOSE OF EXPENDITURE	(a) Category <sub>(S</sub> Advertising	ee Categories listed at the top Expense	of this schedule)	Check if Austin	outside of Texas. Com n, TX, officeholder living ng text credits		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ceholder name	Office sou	ght	Office h	eld	

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
<b>1</b> Total pages Schedule F1:	
Sch: 5/8 Rpt: 16/19	Texans United for a Conservative Majority PAC     3 Filer ID     (Ethics Commission Filers)
4 Date	5 Payee name
11/11/2024	Peerly Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$40,000.00	2232 Dell Range Rd.
	STE 287
Expenditure from	
corporate funds	Cheyenne, WY 82009
8 PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Advertising Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Pre-purchasing text credits</li> </ul>
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/19/2024	Peerly Inc.
Amount (\$)	Payee address; City; State; Zip Code
.,	
\$34,000.00	2232 Dell Range Rd.
Expenditure from corporate funds	STE 287 Cheyenne, WY 82009
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Advertising Expense</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Pre-purchasing text credits</li> </ul> </li> </ul>
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/26/2024	Peerly Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$27,000.00	2232 Dell Range Rd.
Expenditure from	STE 287
corporate funds	Cheyenne, WY 82009
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Advertising Expense</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Pre-purchasing text credits</li> </ul> </li> </ul>
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees O Food/Beverage Expense Pe Gift/Awards/Memorials Expense Pr	an Repayment/Reimbursement fice Overhead/Rental Expense Illing Expense inting Expense Ilaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense 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: 6/8 Rpt: 17/19	Texans United for a Conservative Majority	/ PAC	00088252	
4 Date	5 Payee name			
12/02/2024	Peerly Inc.			
6 Amount (\$)	<b>7</b> Payee address; City; State; Z	ip Code		
\$13,758.00	2232 Dell Range Rd.			
\$10,100.00				
Expenditure from	STE 287			
corporate funds	Cheyenne, WY 82009			
8 PURPOSE	(a) Category (as a structure listed with the effective state	e) (b) Description		
OF	(a) Category (See Categories listed at the top of this schedul		outside of Texas. Complete Schedule T.	
EXPENDITURE	Advertising Expense		, TX, officeholder living expense	
			orm voters about Speaker of the House	
		Race	on voters about Speaker of the House	
		Nace		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF		e sought	Office held	
Date	Payee name			
12/02/2024	Peerly Inc.			
	-			
Amount (\$)	Payee address; City; State; Z	ip Code		
\$29,586.00	2232 Dell Range Rd.			
	STE 287			
Expenditure from corporate funds	Cheyenne, WY 82009			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Advertising Expense	Check if travel	outside of Texas. Complete Schedule T. , TX, officeholder living expense orm voters about Speaker of the House	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ce sought	Office held	
Date	Payee name			
12/06/2024	Peerly Inc.			
Amount (\$)	Payee address; City; State; Z	ip Code		
\$25,000.00	2232 Dell Range Rd.			
Ψ23,000.00	-			
Expenditure from	STE 287			
corporate funds	Cheyenne, WY 82009			
PURPOSE	(a) Category (See Categories listed at the top of this schedul	<sub>e)</sub> (b) Description		
	Advertising Expense		outside of Texas. Complete Schedule T.	
EXPENDITURE	- '	Check if Austin	, TX, officeholder living expense	
		Pre-purchasi	ng text credits	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		e sought	Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense         Loan Repayment/Reimburse           Fees         Office Overhead/Rental Exp           Food/Beverage Expense         Polling Expense           y -         Gift/Awards/Memorials Expense         Printing Expense	ense Transportation Equipment & Related Expense Travel in District Travel Out of District bor OTHER (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 7/8 Rpt: 18/19	Texans United for a Conservative Majority PAC	00088252	
4 Date	5 Payee name		
12/30/2024	Peerly Inc.		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$15,000.00	2232 Dell Range Rd.		
	STE 287		
Expenditure from corporate funds	Cheyenne, WY 82009		
8 PURPOSE OF EXPENDITURE		on if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense chasing text credits	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H	Office held	
Date	Payee name		
12/02/2024	Remington Research Group		
Amount (\$)	Payee address; City; State; Zip Code		
\$9,900.00	800 W 47th St		
	STE 200		
Expenditure from corporate funds	Kansas City, MO 64112		
PURPOSE OF EXPENDITURE		ON if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense esearch	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H	Office held	
Date	Payee name		
10/31/2024	Steve Allen Kinard Campaign		
Amount (\$)	Payee address; City; State; Zip Code		
\$5,000.00	2506 Valley Forge		
Expenditure from corporate funds	Richardson, TX 75080		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descripting		
EXPENDITURE	Candidate/Officeholder/Political Committee	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense gn Contribution	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H	Office held	

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a)         Event Expense       Loan Repayment/Reimbursement       Solicitation/Fundraising Expense         Fees       Office Overhead/Rental Expense       Transportation Equipment & Related Expense         Food/Beverage Expense       Polling Expense       Travel in District         Glft/Awards/Memorials Expense       Printing Expense       Travel OUt of District         I Committee       Legal Services       Salaries/Wages/Contract Labor       OTHER (enter a category not listed above)
<b>1</b> Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/8 Rpt: 19/19	Texans United for a Conservative Majority PAC 00088252
· · · · · · · · · · · · · · · · · · ·	
4 Date	5 Payee name
12/31/2024	Texas Bank
6 Amount (\$) \$340.00	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>901 Santa Fe Dr.</li> </ul>
corporate funds	Weatherford, TX 76086
8 PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Accounting/Banking</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>W/T Fees</li> </ul>
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/31/2024	WinRed
Amount (\$)	Payee address; City; State; Zip Code
\$143.49	1776 Wilson Blvd
+= 101.10	Suite 530
Expenditure from corporate funds	Arlington, VA 22219
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Processing Fees
	Constitute/Office helder norma
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
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