#### 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) 00081062 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Victory Fund 2020 PAC Date Received **ELECTRONICALLY FILED** 07/01/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1006 Banister Ln., Apt. 1001 Date Hand-delivered or Date Postmarked Austin, TX 78704 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Steven NAME NICKNAME LAST **SUFFIX** Rivas STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1006 Banister Ln., Apt. 1001 STREET **ADDRESS** (Residence or Business) Austin, TX 78704 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1006 Banister Ln. Bldg. 10, Apt. 1001 MAILING **ADDRESS** Austin, TX 78704 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (210) 310-4224 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2025 06/30/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Runoff Other Primary 11/04/2025 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)
Texas Victory Fund 2020 PAC 000			00081062	
14 COMMITTEE	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)	7. Capported		
		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)	\$	877.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	922.32
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	662.91
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	<b>I</b>		<u> </u>	
		I swear, or affirm, under penalty of petrue and correct and includes all inforrunder Title 15, Election Code.		
		Mr. Sto	ven Rivas	
		Signature of Car		uror
		Signature of Car	iipaigii iieast	ii Ci
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscri	bed before me, by the said	, th	nis the	day
of	, 20, to certify v	which, witness my hand and seal of office.		
Signature of office	r administering oath	Printed name of officer administering oath	Title of office	cer administering oath

### **SUBTOTALS - GPAC**

## FORM **GPAC**COVER SHEET PG 3

			3 of 22
17 COMMITTE Texas Vict	EE NAME tory Fund 2020 PAC	<b>18</b> Filer ID 00081062	(Ethics Commission Filers)
19 SCHEDULE NAME OF S		SUBTOTAL AMOUNT	
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 877.00
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 CORPORALABOR 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 CONTRIBUTION	S	<b>\$</b> 922.32
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 TO FILER	RETURNED	\$
1			

	MONETARY POLITICAL CONTRIBUTIONS					<b>■ A1</b>	
	The Instruc	ction Guide explains how t	to complete this form	n.	1	Total pages Schedule A1: Sch: 1/7 Rpt: 4/22	
2	FILER NAME Texas Victor	y Fund 2020 PAC			3	Filer ID (Ethics Commission 00081062	Filers)
4	Date 01/27/2025	_ `		7	Amount of Contribution (\$)	\$25.00	
8	Principal occu	MCKINNEY, TX 75072 pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	NOT EMPLO			NOT EMPLOYED			
	Date 02/27/2025	Full name of contributor  BAILEY, SYLVIA  Contributor address; City; Stat	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
		MCKINNEY, TX 75072					
	Principal occupation / Job title (See Instructions)  NOT EMPLOYED  Employer (See Instructions)  NOT EMPLOYED		5)				
	Date 03/27/2025			)		Amount of Contribution (\$)	\$25.00
	Principal occur	MCKINNEY, TX 75072 pation / Job title (See Instructions)		Employer (See Instructions	.)		
	NOT EMPLO			NOT EMPLOYED	')		
	Date 04/27/2025	Full name of contributor out-of-state PAC (ID#:)		,		Amount of Contribution (\$)	\$25.00
		Employer (See Instructions NOT EMPLOYED	5)				
	Date Full name of contributor out-of-state PAC (ID#:)  D5/27/2025 BAILEY, SYLVIA  Contributor address; City; State; Zip Code  MCKINNEY, TX 75072			Amount of Contribution (\$)	\$25.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions NOT EMPLOYED	5)		
			I				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUL	E A1	
	The Instruc	ction Guide explains how to complete	this form.	1	Total pages Schedule A1: Sch: 2/7 Rpt: 5/22		
2	FILER NAME Texas Victor	y Fund 2020 PAC		3	Filer ID (Ethics Commission 00081062	n Filers)	
4	Date 06/27/2025			Amount of Contribution (\$)	\$25.00		
8		MCKINNEY, TX 75072 pation / Job title (See Instructions)		er (See Instructions)			
	Date 01/16/2025	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$7.00	
	MAGNOLIA, TX 77354  Principal occupation / Job title (See Instructions)  SALES  Employer (See Instructions)  SELF		er (See Instructions)				
	Date 02/16/2025				Amount of Contribution (\$)	\$7.00	
	Principal occu	MAGNOLIA, TX 77354 pation / Job title (See Instructions)	Employe SELF	er (See Instructions)			
	Date 03/16/2025	Full name of contributor		,	Amount of Contribution (\$)	\$7.00	
MAGNOLIA, TX 77354  Principal occupation / Job title (See Instructions)  SALES  Employer SELF		er (See Instructions)					
	Date Full name of contributor out-of-state PAC (ID#:) 04/16/2025 GOSSE, THOMAS  Contributor address; City; State; Zip Code  MAGNOLIA, TX 77354			Amount of Contribution (\$)	\$7.00		
	Principal occu SALES	pation / Job title (See Instructions)	Employe SELF	er (See Instructions)			

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE	LE <b>A1</b>		
	The Instruc	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 3/7 Rpt: 6/22	
2	FILER NAME Texas Victor	y Fund 2020 PAC			3	Filer ID (Ethics Commission 00081062	Filers)
4	Date 05/16/2025			7	Amount of Contribution (\$)	\$7.00	
8		MAGNOLIA, TX 77354 pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:)  06/16/2025 GOSSE, THOMAS  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$7.00		
	MAGNOLIA, TX 77354  Principal occupation / Job title (See Instructions)  SALES  Employer (See Instructions)  SELF		<u> </u> s)				
	Date 01/02/2025	Full name of contributor out-of-state PAC (ID#:) PRESSMAN, RICHARD  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$10.00	
	Principal occu TEACHER	SAN ANTONIO, TX 78230 pation / Job title (See Instructions)		Employer (See Instructions ST. MARY'S UNIVERSI	•		
	Date 02/02/2025	Full name of contributor  out-of-state PAC (ID#:)			Amount of Contribution (\$)	\$10.00	
		Employer (See Instructions ST. MARY'S UNIVERSI					
	Date Full name of contributor out-of-state PAC (ID#:)  03/02/2025 PRESSMAN, RICHARD  Contributor address; City; State; Zip Code  SAN ANTONIO, TX 78230		•	Amount of Contribution (\$)	\$10.00		
	Principal occu TEACHER	pation / Job title (See Instructions)		Employer (See Instructions ST. MARY'S UNIVERS		,	

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A		
	The Instruc	ction Guide explains how to complete this fo	or	m.	1	Total pages Schedule A1: Sch: 4/7 Rpt: 7/22	
2	FILER NAME Texas Victor	y Fund 2020 PAC			3	Filer ID (Ethics Commission 00081062	ı Filers)
4	Date 04/02/2025	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$10.00
8		SAN ANTONIO, TX 78230 pation / Job title (See Instructions)	9	Employer (See Instructions			
	Date Full name of contributor out-of-state PAC (ID#:)  05/02/2025 PRESSMAN, RICHARD  Contributor address; City; State; Zip Code  SAN ANTONIO, TX 78230			Amount of Contribution (\$)	\$10.00		
Principal occupation / Job title (See Instructions)  TEACHER  Employer (See Instructions  ST. MARY'S UNIVERS			,				
	Date 06/02/2025	Full name of contributor out-of-state PAC (ID#:_PRESSMAN, RICHARD  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$10.00
	Principal occu	SAN ANTONIO, TX 78230 pation / Job title (See Instructions)		Employer (See Instructions ST. MARY'S UNIVERSI	•	,	
	Date 01/27/2025	Date Full name of contributor out-of-state PAC (ID#:)			Amount of Contribution (\$)	\$50.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions NOT EMPLOYED	<u>l</u> s)		
	Date 02/27/2025	Full name of contributor out-of-state PAC (ID#:_SAWTELL, CYNTHIA  Contributor address; City; State; Zip Code  SAN ANSELMO, CA 94960				Amount of Contribution (\$)	\$50.00
	Principal occu	oation / Job title (See Instructions) YYED		Employer (See Instructions NOT EMPLOYED	5)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 5/7 Rpt: 8/22		
2	FILER NAME Texas Victory	y Fund 2020 PAC			3	Filer ID (Ethics Commission 00081062	n Filers)
4	Date 03/27/2025	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$50.00
8		SAN ANSELMO, CA 94960 pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:)  04/27/2025 SAWTELL, CYNTHIA  Contributor address; City; State; Zip Code  SAN ANSELMO, CA 94960			Amount of Contribution (\$)	\$50.00		
	Principal occupation / Job title (See Instructions)  NOT EMPLOYED  Employer (See Instructions)  NOT EMPLOYED		5)				
	Date 05/27/2025	Full name of contributor out-of-state PAC (ID: SAWTELL, CYNTHIA  Contributor address; City; State; Zip Code	#:	)		Amount of Contribution (\$)	\$50.00
		Employer (See Instructions	<u> </u> s)				
	Date 01/14/2025	Full name of contributor out-of-state PAC (ID#:)  1/14/2025 STOCKMAN, GAIL  Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$50.00
WAXAHACHIE, TX 75167  Principal occupation / Job title (See Instructions)  PHYSICIAN  Employer (See Instruction SELF		Employer (See Instructions	<u>I</u> S)				
	Date Full name of contributor out-of-state PAC (ID#:)  02/14/2025 STOCKMAN, GAIL  Contributor address; City; State; Zip Code  WAXAHACHIE, TX 75167		•	Amount of Contribution (\$)	\$50.00		
	Principal occup PHYSICIAN	pation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE	<b>E A1</b>	
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 6/7 Rpt: 9/22		
2	FILER NAME Texas Victor	y Fund 2020 PAC			3	Filer ID (Ethics Commission 00081062	ı Filers)	
4	Date 03/14/2025	5 Full name of contributor out-of-state PAC (ID#:)  STOCKMAN, GAIL  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$50.00		
8	Principal occu	WAXAHACHIE, TX 75167 pation / Job title (See Instructions)	9	Employer (See Instructions	  -  s)			
	Date 04/14/2025	Full name of contributor STOCKMAN, GAIL  Contributor address; City; Sta	out-of-state PAC (ID#:	SELF)		Amount of Contribution (\$)	\$50.00	
	WAXAHACHIE, TX 75167  Principal occupation / Job title (See Instructions)  PHYSICIAN  Employer (See Instructions)  SELF			  -  s)				
	Date 05/14/2025	Full name of contributor out-of-state PAC (ID#:)  STOCKMAN, GAIL  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00		
	•	WAXAHACHIE, TX 75167 pation / Job title (See Instructions)		Employer (See Instructions	  -  s)			
	Date 06/14/2025			)		Amount of Contribution (\$)	\$50.00	
	Principal occu	WAXAHACHIE, TX 75167 pation / Job title (See Instructions)		Employer (See Instructions	  -  s)			
	Date 01/18/2025	ate Full name of contributor out-of-state PAC (ID#:)			Amount of Contribution (\$)	\$12.50		
	Principal occu LIBRARY AS	pation / Job title (See Instructions)		Employer (See Instructions SALT LAKE CITY PUBL		LIBRARY		

	MONEI	ARY POLITICAL COI	NIRIBUTION	NS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how to	complete this for	m.	1	Total pages Schedule A1: Sch: 7/7 Rpt: 10/22	
2	FILER NAME	y Fund 2020 PAC			3	Filer ID (Ethics Commission 00081062	Filers)
4	Date 02/18/2025	_		7	Amount of Contribution (\$)	\$12.50	
		SALT LAKE CITY, UT 84102-2	2721				
8	LIBRARY AS			Employer (See Instructions SALT LAKE CITY PUBL			
	Date 03/18/2025	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$12.50
	Dringinal acqu	SALT LAKE CITY, UT 84102-2	2721	Employer (See Instructions			
	Principal occupation / Job title (See Instructions)  LIBRARY ASSISTANT  Employer (See Instructions SALT LAKE CITY PUBL			LIBRARY			
	Date 04/18/2025	Full name of contributor out-of-state PAC (ID#:)  WINSLOW, DYLAN  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$12.50	
		SALT LAKE CITY, UT 84102-2	2721				
	Principal occu LIBRARY AS	pation / Job title (See Instructions) SSISTANT		Employer (See Instructions SALT LAKE CITY PUBL		LIBRARY	
	Date 05/18/2025					Amount of Contribution (\$)	\$12.50
	SALT LAKE CITY, UT 84102-2721  Principal occupation / Job title (See Instructions)  LIBRARY ASSISTANT  SALT LAKE CITY PUBLICATION SALT PUBLICATIO			LIBRARY			
	Date Full name of contributor out-of-state PAC (ID#:)  06/18/2025 WINSLOW, DYLAN  Contributor address; City; State; Zip Code  SALT LAKE CITY, UT 84102-2721			Amount of Contribution (\$)	\$12.50		
	Principal occu LIBRARY AS	pation / Job title (See Instructions) SSISTANT		Employer (See Instructions SALT LAKE CITY PUBL		LIBRARY	

#### 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: 1/12 Rpt: 11/22	Texas Victory Fund 2020 PAC 00081062
4 Date	5 Payee name
01/09/2025	Action Network
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$10.00	1900 L Street NW, No. 900
Expenditure from corporate funds	Washington, DC 20036
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Voter/Donor Outreach
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/10/2025	Action Network
Amount (\$)	Payee address; City; State; Zip Code
\$10.00	1900 L Street NW, No. 900
Expenditure from corporate funds	Washington, DC 20036
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Voter/Donor Outreach
	Votel/Donor Outreach
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	· ·
Date	Payee name
03/03/2025	Action Network
Amount (\$)	
\$10.00	1900 L Street NW, No. 900
Expenditure from corporate funds	Washington, DC 20036
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Voter/Donor Outreach
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	¬

#### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mei

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: 2/12 Rpt: 12/22	Texas Victory Fund 2020 PAC 00081062	
4 Date	5 Payee name	
04/09/2025	Action Network	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$10.00	1900 L Street NW, No. 900	
Expenditure from	Washington, DC 20036	
corporate funds	Washington, DC 20030	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense	
	Check if Austin, TX, officeholder living expense	
	Voter/Donor Outreach	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
Date	Payee name	-
05/09/2025	Action Network	
		_
Amount (\$)	Payee address; City; State; Zip Code	
\$10.00	1900 L Street NW, No. 900	
Expenditure from corporate funds	Washington, DC 20036	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense	
LAFENDITORE	Check if Austin, TX, officeholder living expense	
	Voter/Donor Outreach	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Date	Payee name	=
06/09/2025	Action Network	
00/09/2025		
Amount (\$)	Payee address; City; State; Zip Code	
\$10.00	1900 L Street NW, No. 900	
Expenditure from corporate funds	Washington, DC 20036	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Voter/Donor Outreach	
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 -

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: 3/12 Rpt: 13/22	Texas Victory Fund 2020 PAC 00081062
4 Date	5 Payee name
01/06/2025	Frost Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$15.00	111 W Houston St Suite 100
Expenditure from corporate funds	San Antonio, TX 78205
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/OI	1
Date	Payee name
01/21/2025	Frost Bank
Amount (\$)	Payee address; City; State; Zip Code
\$15.00	111 W Houston St Suite 100
Expenditure from corporate funds	San Antonio, TX 78205
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Fees
	rees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payeo namo
02/03/2025	Payee name Frost Bank
Amount (\$)	Payee address; City; State; Zip Code
\$15.00	111 W Houston St Suite 100
Expenditure from	
corporate funds	San Antonio, TX 78205
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
Di Libilone	Check if Austin, TX, officeholder living expense
	Fees
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 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
Transport in District 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 File	ers)
Sch: 4/12 Rpt: 14/22	Texas Victory Fund 2020 PAC 00081062	
4 Date	5 Payee name	
02/18/2025	Frost Bank	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$15.00	111 W Houston St Suite 100	
- "		
Expenditure from corporate funds	San Antonio, TX 78205	
8 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	
	Fees	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
Data		
Date 02/24/2025	Payee name Frost Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$15.00	111 W Houston St Suite 100	
Expenditure from		
corporate funds	San Antonio, TX 78205	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	Fees	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·	
	<u> </u>	
Date	Payee name	
03/03/2025	Frost Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$15.00	111 W Houston St Suite 100	
Expenditure from		
corporate funds	San Antonio, TX 78205	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
EXI ENDITORE	Check if Austin, TX, officeholder living expense	
	Fees	
Occupations Children	Outside to 10ff as halden as well as a soul in the second as a sec	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
p = 1 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2		

### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/12 Rpt: 15/22	Texas Victory Fund 2020 PAC	00081062
4 Date	5 Payee name	
03/17/2025	Frost Bank	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$15.00	111 W Houston St Suite 100	
— Foresedit ve from		
Expenditure from corporate funds	San Antonio, TX 78205	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Fees
		1663
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI		Since Held
Data		
Date	Payee name	
03/24/2025	Frost Bank	
Amount (\$)	Payee address; City; State; Zip Co	de
\$15.00	111 W Houston St Suite 100	
Expenditure from		
corporate funds	San Antonio, TX 78205	
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
		Fees
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI	<del>1</del>	
Date	Payee name	
03/31/2025	Frost Bank	
Amount (\$)	Payee address; City; State; Zip Co	de
\$15.00	111 W Houston St Suite 100	
¥20.00		
Expenditure from corporate funds	San Antonio, TX 78205	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
- p - 1.13.12 12 20.10.11 3701		

### 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/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: 6/12 Rpt: 16/22	Texas Victory Fund 2020 PAC 00081062
4 Date	5 Payee name
04/07/2025	Frost Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$15.00	111 W Houston St Suite 100
Expenditure from corporate funds	San Antonio, TX 78205
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Fees
	1 663
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
04/21/2025	Frost Bank
Amount (\$)	Payee address; City; State; Zip Code
\$15.00	111 W Houston St Suite 100
Expenditure from corporate funds	San Antonio, TX 78205
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/28/2025	Frost Bank
Amount (\$)	Payee address; City; State; Zip Code
\$15.00	111 W Houston St Suite 100
Expenditure from corporate funds	San Antonio, TX 78205
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Fees
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)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 7/12 Rpt: 17/22	Texas Victory Fund 2020 PAC	00081062
4 Date	5 Payee name	
05/05/2025	Frost Bank	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$15.00	111 W Houston St Suite 100	
— Foresedit ve from		
Expenditure from corporate funds	San Antonio, TX 78205	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Fees
		1663
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI		Since Hold
Data		
Date	Payee name	
05/19/2025	Frost Bank	
Amount (\$)	Payee address; City; State; Zip Co	de
\$15.00	111 W Houston St Suite 100	
Expenditure from		
corporate funds	San Antonio, TX 78205	
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
		Fees
		. 333
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht Office held
expenditure to benefit C/OI		
Date	Davida nama	
06/02/2025	Payee name Frost Bank	
		da
Amount (\$) \$15.00	Payee address; City; State; Zip Co 111 W Houston St Suite 100	ue
Φ15.00	111 W Houston St Suite 100	
Expenditure from	Can Antonia TV 7920E	
corporate funds	San Antonio, TX 78205	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Accounting/Banking	Check if dustin, TX, officeholder living expense
		Fees
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght 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 Committe

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

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

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: 8/12 Rpt: 18/22 Texas Victory Fund 2020 PAC 00081062 4 Date Payee name 06/09/2025 Frost Bank 6 Amount (\$) Payee address; City; State; Zip Code \$15.00 111 W Houston St Suite 100 Expenditure from San Antonio, TX 78205 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. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/16/2025 Frost Bank Amount (\$) Payee address; City; State; Zip Code \$15.00 111 W Houston St Suite 100 Expenditure from San Antonio, TX 78205 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. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/23/2025 Frost Bank Amount (\$) Payee address: City: State; Zip Code \$15.00 111 W Houston St Suite 100 Expenditure from corporate funds San Antonio, TX 78205 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Fees 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 Candidate/Officeholder/Political Comm

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

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

Candidate/Officenolder/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 9/12 Rpt: 19/22	Texas Victory Fund 2020 PAC 00081062
4 Date	5 Payee name
06/30/2025	Frost Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$15.00	111 W Houston St Suite 100
Expenditure from corporate funds	San Antonio, TX 78205
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Fees
	rees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
oxportantaro to sorione or o	
Date	Payee name
01/31/2025	Frost Bank
Amount (\$)	Payee address; City; State; Zip Code
\$10.00	111 W Houston St Suite 100
Expenditure from corporate funds	San Antonio, TX 78205
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
_/	Check if Austin, TX, officeholder living expense
	Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to belieff of of	'
Date	Payee name
02/28/2025	Frost Bank
Amount (\$)	Payee address; City; State; Zip Code
\$10.00	111 W Houston St Suite 100
,	
Expenditure from corporate funds	San Antonio, TX 78205
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure 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 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 o	complete	e this form.
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 10/12 Rpt: 20/22	Texas Victory Fund 2020 PAC		00081062
4 Date	5 Payee name		<b>I</b>
03/31/2025	Frost Bank		
6 Amount (\$)	7 Payee address; City; State; Zip C	Code	
\$10.00	111 W Houston St Suite 100		
Expenditure from corporate funds	San Antonio, TX 78205		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) D	Description
OF EXPENDITURE	Accounting/Banking	[	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		[	Check if Austin, TX, officeholder living expense
		-	<del>-</del> ees
O Commission ONLL V if direct	Constitute (Office helder nome		Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H	ougni	Office field
Date	Payee name		
04/28/2025	Frost Bank		
Amount (\$)	Payee address; City; State; Zip C	Code	
\$10.00	111 W Houston St Suite 100		
Expenditure from			
corporate funds	San Antonio, TX 78205		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) [	Description
OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder name Office so	 ought	Office held
expenditure to benefit C/O		Ü	
Date	Payee name		
05/30/2025	Frost Bank		
Amount (\$)	Payee address; City; State; Zip C	Codo	
\$10.00	111 W Houston St Suite 100	Soue	
Ψ10.00	TIT W Houston St Suite 100		
Expenditure from	San Antonio, TX 78205		
corporate funds		[a\ -	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(a) [	Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Accounting/Banking		Check if Austin, TX, officeholder living expense
			<del>-</del> ees
Complete ONLY if direct	Candidate/Officeholder name Office so	ought	Office held
expenditure to benefit C/O	H		

#### 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

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

Labor 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: 11/12 Rpt: 21/22	Texas Victory Fund 2020 PAC 00081062
4 Date	5 Payee name
06/30/2025	Frost Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$10.00	111 W Houston St Suite 100
Expenditure from	
corporate funds	San Antonio, TX 78205
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Fees
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	<del>1</del>
Date	Payee name
02/19/2025	Sinch Mailjet
Amount (\$)	Payee address; City; State; Zip Code
\$55.00	3500 Lenox Road NE Suite #1875
\$55.00	3500 Leliox Rodu NE Suite #1875
Expenditure from	
corporate funds	Atlanta, GA 30326
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Voter/Donor Outreach
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
03/19/2025	Sinch Mailjet
Amount (\$)	Payee address; City; State; Zip Code
\$55.00	3500 Lenox Road NE Suite #1875
Ψ55.00	5555 ESTISK NORW NE GUILO // ESTO
Expenditure from	AH
corporate funds	Atlanta, GA 30326
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Voter/Donor Outreach
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
oxportations to benefit 6/01	•

#### SCHEDULE F1

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

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

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	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: 12/12 Rpt: 22/22	Texas Victory Fund 2020 PAC 00081062
4 Date	5 Payee name
01/13/2025	The Rivas Group
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$300.00	1006 Banister Ln. Apt 1001
Expenditure from corporate funds	Austin, TX 78704
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Consulting
	Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/14/2025	The Rivas Group
Amount (\$)	Payee address; City; State; Zip Code
\$107.32	1006 Banister Ln. Apt 1001
Expenditure from corporate funds	Austin, TX 78704
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.
	Conculting
	Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held