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) 00051076 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Alliance for Life Date Received **ELECTRONICALLY FILED** 07/13/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 8000 Centre Park Dr., Ste. 380 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78754-5136 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. James C. NAME NICKNAME LAST **SUFFIX** Shaw STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 4505 Corazon Cv. STREET **ADDRESS** (Residence or Business) Round Rock, TX 78681 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 8000 Centre Park Dr., Ste. 380 MAILING **ADDRESS** Austin, TX 78754 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 789-0111 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 χ Primary Runoff Other 03/03/2026 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 Alliance for Life			0005107	6
ACTIVITY (Ider	Candidates ntify by name or, if icable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
(Des	Measures scribe by date and location ection and nature of issue.)	A. Supported B. Opposed		
		В. Орроски		
(Ider	Officeholders Assisted ntify by name or, if icable, classify by party.)			
TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
2.		L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	14,052.58
EXPENDITURE 3. TOTALS	TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
4.	TOTAL POLITICA	L EXPENDITURES	\$	1,908.10
	TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	6,955.15
		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			<u>'</u>	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Mr. Jame	s C. Shaw	
		Signature of Car	mpaign Treas	surer
AFFIX NOTARY STA	MP / SEAL ABOVE			
		, th	nis the	day
of, 20_	, to certify v	vhich, witness my hand and seal of office.		
Signature of officer adminis	stering oath	Printed name of officer administering oath	Title of of	ficer administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

				J V L	3 of 53
		EE NAME ance for Life	18 Filer ID 00051076	(Ethic	cs Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	12,052.58
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	4,645.00
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA	ANIZATION	\$	
7.	X	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	2,000.00
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	\$	1,890.63
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	1,278.05
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	
1					

	MONET	ARY POLITICAL CONTRIBUTIO	ONS		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/38 Rpt: 4/53	
2	FILER NAME Texas Allian	ce for Life		3	Filer ID (Ethics Commission 00051076	ı Filers)
4	Date 01/23/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$10.00
_		Cedar Park, TX 78613				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 02/23/2025	Full name of contributor out-of-state PAC (ID#:_Atkins, Mary Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
	Deinsinal assu	Cedar Park, TX 78613	Franks on (Cas Instructions	<u></u>		
	Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/23/2025	Full name of contributor out-of-state PAC (ID#:_ Atkins, Mary Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
		Cedar Park, TX 78613				
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 04/23/2025	Full name of contributor out-of-state PAC (ID#:_Atkins, Mary Contributor address; City; State; Zip Code Cedar Park, TX 78613)		Amount of Contribution (\$)	\$10.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 05/23/2025	Full name of contributor out-of-state PAC (ID#:_Atkins, Mary Contributor address; City; State; Zip Code Cedar Park, TX 78613)		Amount of Contribution (\$)	\$10.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	■ A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 2/38 Rpt: 5/53	
2	FILER NAME Texas Alliand	ce for Life		3	Filer ID (Ethics Commission 00051076	ı Filers)
4	Date 01/23/2025	 Full name of contributor	_	7	Amount of Contribution (\$)	\$50.00
_		Austin, TX 78708	1	_		
8	Principal occur Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 02/23/2025	Full name of contributor out-of-state PAC (ID#: Belisle, Merritt Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Dringing aggr	Austin, TX 78708	Employer (Coo Instructions	<u></u>		
	Attorney	pation / Job title (See Instructions)	Employer (See Instructions	o)		
	Date 03/23/2025	Full name of contributor out-of-state PAC (ID#: Belisle, Merritt Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Austin, TX 78708				
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 04/23/2025	Full name of contributor out-of-state PAC (ID#: Belisle, Merritt Contributor address; City; State; Zip Code Austin, TX 78708)	•	Amount of Contribution (\$)	\$50.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 05/23/2025	Full name of contributor out-of-state PAC (ID#: Belisle, Merritt Contributor address; City; State; Zip Code Austin, TX 78708		•	Amount of Contribution (\$)	\$50.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			•			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 3/38 Rpt: 6/53	
2	FILER NAME Texas Alliand	e for Life		3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 06/23/2025	 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$50.00
_		Austin, TX 78708				
8	Principal occur Attorney	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 01/23/2025	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
	Principal occur	Schulenberg, TX 78956 pation / Job title (See Instructions)	Employer (See Instructions	<u>.</u>		
	Geologist	action, eds and (ede iniciaectorie)	Employer (GGC mondoner)	,		
	Date 02/23/2025	Full name of contributor out-of-state PAC (ID#: Berger, Becky Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Schulenberg, TX 78956				
	Principal occu Geologist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/24/2025	Full name of contributor out-of-state PAC (ID#: CERNOSEK, ROSE MARY Contributor address; City; State; Zip Code San Antonio, TX 78256)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 01/23/2025	Full name of contributor out-of-state PAC (ID#: Cortez, Kristy Contributor address; City; State; Zip Code Austin, TX 78717			Amount of Contribution (\$)	\$52.09
	Principal occu CPA	oation / Job title (See Instructions)	Employer (See Instructions	i)		
		1				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	■ A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/38 Rpt: 7/53	
2	FILER NAME Texas Allian	ce for Life		3	Filer ID (Ethics Commission 00051076	ı Filers)
4	Date 02/23/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$52.09
		Austin, TX 78717				
8	Principal occu CPA	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 03/23/2025	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$52.09
	Principal occu CPA	Austin, TX 78717 pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		
	Date 04/23/2025	Full name of contributor out-of-state PAC (ID#:_ Cortez, Kristy Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$52.09
		Austin, TX 78717				
	Principal occu CPA	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 05/23/2025	Full name of contributor out-of-state PAC (ID#:_ Cortez, Kristy Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$52.09
	'	Austin, TX 78717 pation / Job title (See Instructions)	Employer (See Instructions	(i)		
	Date 06/23/2025	Full name of contributor out-of-state PAC (ID#:_ Cortez, Kristy Contributor address; City; State; Zip Code Austin, TX 78717			Amount of Contribution (\$)	\$52.09
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 5/38 Rpt: 8/53	
2	FILER NAME Texas Allian	ce for Life		3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 06/09/2025	 Full name of contributor	_	7	Amount of Contribution (\$)	\$1,500.00
8	Principal occu	Georgetown, TX 78633 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	Retired			,		
	Date 02/23/2025	Full name of contributor out-of-state PAC (ID#: DeWine, Dennis Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$625.00
	Principal occu	San Antonio, TX 78248 pation / Job title (See Instructions)	Employer (See Instructions	.) 		
	Retired	sation, oop title (occ instructions)	Employer (See mondene)	')		
	Date 05/23/2025	Full name of contributor out-of-state PAC (ID#: DeWine, Dennis Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$625.00
		San Antonio, TX 78248				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 06/07/2025	Full name of contributor out-of-state PAC (ID#: Edwards, John Contributor address; City; State; Zip Code Pflugerville, TX 78660)		Amount of Contribution (\$)	\$50.00
	Principal occu NA	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/23/2025	Full name of contributor out-of-state PAC (ID#: Fitzgerald, Aine Contributor address; City; State; Zip Code Waco, TX 76710			Amount of Contribution (\$)	\$10.00
	Principal occu Tutor/Self	pation / Job title (See Instructions)	Employer (See Instructions	·)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 6/38 Rpt: 9/53	
2	FILER NAME Texas Alliand	ce for Life		3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 02/23/2025	 Full name of contributor out-of-state PAC (ID# Fitzgerald, Aine Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$10.00
_		Waco, TX 76710	T			
8	Principal occu Tutor/Self	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 03/23/2025	Full name of contributor out-of-state PAC (ID#Fitzgerald, Aine Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$10.00
	Principal occur	Waco, TX 76710 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	Tutor/Self	sation, cos tale (coe included ins)	Employer (God mondonoris	•,		
	Date 04/23/2025	Full name of contributor out-of-state PAC (ID# Fitzgerald, Aine Contributor address; City; State; Zip Code	:)	•	Amount of Contribution (\$)	\$10.00
		Waco, TX 76710				
	Principal occu Tutor/Self	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 05/23/2025	Full name of contributor out-of-state PAC (ID# Fitzgerald, Aine Contributor address; City; State; Zip Code Waco, TX 76710	:)		Amount of Contribution (\$)	\$10.00
	Principal occu Tutor/Self	pation / Job title (See Instructions)	Employer (See Instructions	<u>l</u> s)		
	Date 06/23/2025	Full name of contributor out-of-state PAC (ID#Fitzgerald, Aine Contributor address; City; State; Zip Code Waco, TX 76710	:)		Amount of Contribution (\$)	\$10.00
	Principal occu Tutor/Self	oation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONEI	ARY POLITICAL CONTRIBUTIO	INS		SCHEDULI	A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/38 Rpt: 10/53	
2	FILER NAME Texas Alliand	ce for Life		3	Filer ID (Ethics Commission 00051076	Filers)
4	Date 01/23/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$10.00
8	Principal occu Registered N		9 Employer (See Instructions	<u> </u>		
	Date 02/23/2025	Full name of contributor out-of-state PAC (ID#:_Floyd, Kathleen Contributor address; City; State; Zip Code Dripping Springs, TX 78620)		Amount of Contribution (\$)	\$10.00
	Principal occu Registered N	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 03/23/2025	Full name of contributor out-of-state PAC (ID#:_Floyd, Kathleen Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
	Principal occu Registered N	Dripping Springs, TX 78620 Dation / Job title (See Instructions)	Employer (See Instructions	<u>;</u>)		
	Date 04/23/2025	Full name of contributor out-of-state PAC (ID#: Floyd, Kathleen Contributor address; City; State; Zip Code Dripping Springs, TX 78620			Amount of Contribution (\$)	\$10.00
	Principal occu Registered N	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 05/23/2025	Full name of contributor out-of-state PAC (ID#:_Floyd, Kathleen Contributor address; City; State; Zip Code Dripping Springs, TX 78620			Amount of Contribution (\$)	\$10.00
	Principal occu Registered N	pation / Job title (See Instructions) lurse	Employer (See Instructions	<u> </u>		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/38 Rpt: 11/53	
2	FILER NAME Texas Alliand	ce for Life		3	Filer ID (Ethics Commission 00051076	Filers)
4	Date 06/23/2025	 Full name of contributor out-of-state PAC (ID#:_Floyd, Kathleen Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$10.00
8	Principal occur	Dripping Springs, TX 78620 pation / Job title (See Instructions)	Employer (See Instructions)		
•	Registered N			,		
	Date 01/23/2025	Full name of contributor out-of-state PAC (ID#:_ Givens, Edward Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Dringing con	Round Rock, TX 78681	Employer (Coo Instructions			
	Analyst	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 02/23/2025	Full name of contributor out-of-state PAC (ID#:_ Givens, Edward Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Round Rock, TX 78681				
	Principal occu Analyst	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/23/2025	Full name of contributor out-of-state PAC (ID#:_ Givens, Edward Contributor address; City; State; Zip Code Round Rock, TX 78681)		Amount of Contribution (\$)	\$50.00
	Principal occu Analyst	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/23/2025	Full name of contributor out-of-state PAC (ID#:_ Givens, Edward Contributor address; City; State; Zip Code Round Rock, TX 78681			Amount of Contribution (\$)	\$50.00
	Principal occu Analyst	oation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDULI	E A1
	The Instru	tion Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 9/38 Rpt: 12/53	
2	FILER NAME Texas Allian	e for Life		3	Filer ID (Ethics Commission 00051076	ı Filers)
4	Date 05/23/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Round Rock, TX 78681 pation / Job title (See Instructions)	9 Employer (See Instructions)s)		
•	Analyst	adion, 300 title (366 mattactions)	2 Employer (See instructions	13)		
	Date 06/23/2025	Full name of contributor out-of-state PAC (II Givens, Edward Contributor address; City; State; Zip Code)#:)		Amount of Contribution (\$)	\$50.00
	Dringing agg	Round Rock, TX 78681	Employer (See Instruction			
	Analyst	oation / Job title (See Instructions)	Employer (See Instructions	iS)		
	Date 01/23/2025	Full name of contributor out-of-state PAC (III Hashman, Lisa Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$50.00
		Driftwood, TX 78619				
	Principal occu Pediatrician/	oation / Job title (See Instructions) Retired	Employer (See Instructions	ıs)		
	Date 02/23/2025	Full name of contributor out-of-state PAC (II Hashman, Lisa Contributor address; City; State; Zip Code Driftwood, TX 78619	#: <u> </u>		Amount of Contribution (\$)	\$50.00
	Principal occu Pediatrician/	oation / Job title (See Instructions) Retired	Employer (See Instructions	ıs)		
	Date 03/23/2025	Full name of contributor out-of-state PAC (III Hashman, Lisa Contributor address; City; State; Zip Code Driftwood, TX 78619			Amount of Contribution (\$)	\$50.00
	Principal occu Pediatrician/	oation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	. Calaultian					

	MONEI	ARY POLITICAL CO	NIRIBUIIO	INS		SCHEDULI	A1
	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/38 Rpt: 13/53	
2	FILER NAME Texas Allian	ce for Life			3	Filer ID (Ethics Commission 00051076	ı Filers)
4	Date 01/23/2025	5 Full name of contributor Haynes, Brent6 Contributor address; City; State	out-of-state PAC (ID#:_ ; Zip Code		7	Amount of Contribution (\$)	\$25.00
8		Houston, TX 77008 pation / Job title (See Instructions) alveston County District Attorney		9 Employer (See Instructions	;)		
	Date 02/23/2025	Full name of contributor Haynes, Brent Contributor address; City; State Houston, TX 77008	out-of-state PAC (ID#:_ ; Zip Code)		Amount of Contribution (\$)	\$25.00
		pation / Job title (See Instructions) alveston County District Attorney		Employer (See Instructions)		
	Date 03/23/2025	Full name of contributor Haynes, Brent Contributor address; City; State	out-of-state PAC (ID#:_ ; Zip Code			Amount of Contribution (\$)	\$25.00
	•	Houston, TX 77008 pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 04/23/2025	Full name of contributor Haynes, Brent Contributor address; City; State Houston, TX 77008	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	•	pation / Job title (See Instructions) alveston County District Attorney		Employer (See Instructions)		
	Date 05/23/2025	Full name of contributor Haynes, Brent Contributor address; City; State Houston, TX 77008	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$25.00
		pation / Job title (See Instructions) alveston County District Attorney		Employer (See Instructions	()		

	MONET	ARY POLITICAL CON	NTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to c	complete this for	rm.	1	Total pages Schedule A1: Sch: 11/38 Rpt: 14/53	
2	FILER NAME Texas Allian	ce for Life			3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 06/23/2025	Haynes, Brent	ut-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Houston, TX 77008 pation / Job title (See Instructions)	lo	Employer (See Instructions			
0		alveston County District Attorney	3	Employer (See instructions	')		
	Date 02/23/2025	Full name of contributor o hayter, Russell Contributor address; City; State; Z)		Amount of Contribution (\$)	\$300.00
	Principal occu	Mountain City, TX 78610 pation / Job title (See Instructions)		Employer (See Instructions	<u>, </u>		
	Retired	pation / Job title (See Instructions)		Employer (See manucuons	')		
	Date 05/23/2025	Full name of contributor	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$300.00
		Mountain City, TX 78610					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 01/23/2025	Full name of contributor on the derson, Terry Contributor address; City; State; Zubockhart, TX 78644				Amount of Contribution (\$)	\$10.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 02/23/2025	Henderson, Terry	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 12/38 Rpt: 15/53	
2	FILER NAME Texas Allian	ce for Life		3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 03/23/2025	 Full name of contributor out-of-state PAC (ID#: Henderson, Terry Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$10.00
_	Deignaignal	Lockhart, TX 78644	O Familia van (Con Inntervetione	<u></u>		
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 04/23/2025	Full name of contributor out-of-state PAC (ID#: Henderson, Terry Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
		Lockhart, TX 78644				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 05/23/2025	Full name of contributor out-of-state PAC (ID#: Henderson, Terry Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
		Lockhart, TX 78644				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/23/2025	Full name of contributor out-of-state PAC (ID#: Henderson, Terry Contributor address; City; State; Zip Code Lockhart, TX 78644)		Amount of Contribution (\$)	\$10.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 06/06/2025	Full name of contributor out-of-state PAC (ID#: Hunter, Todd Contributor address; City; State; Zip Code Corpus Christi, TX 78412			Amount of Contribution (\$)	\$250.00
	Principal occu Law	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			1			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 13/38 Rpt: 16/53	
2	FILER NAME Texas Alliand	ce for Life		3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 01/23/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	San Antonio, TX 78261 pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Military Cont		2 Impleyer (eee medacare	,		
	Date 02/23/2025	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
		San Antonio, TX 78261				
	Principal occur Military Cont	pation / Job title (See Instructions) ractor	Employer (See Instructions)		
	Date 03/23/2025	Full name of contributor out-of-state PAC (ID#: Jacobs, Michael Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		San Antonio, TX 78261				
	Principal occu Military Cont	pation / Job title (See Instructions) ractor	Employer (See Instructions)		
	Date 04/23/2025	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Military Cont	pation / Job title (See Instructions) ractor	Employer (See Instructions)		
	Date 05/23/2025	Full name of contributor out-of-state PAC (ID#: Jacobs, Michael Contributor address; City; State; Zip Code San Antonio, TX 78261			Amount of Contribution (\$)	\$100.00
	Principal occu Military Cont	pation / Job title (See Instructions) ractor	Employer (See Instructions)		
	,					

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULI	E A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 14/38 Rpt: 17/53	
2	FILER NAME Texas Allian	ce for Life		3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 06/23/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
8	Drincinal occu	San Antonio, TX 78261 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Military Cont		Employer (See instructions	')		
	Date 01/23/2025	Full name of contributor out-of-state PAC (ID#: Joiner, Diane Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Dringinal accu	Lakeway, TX 78738 pation / Job title (See Instructions)	Employer (See Instructions			
	Retired	Jalion / Job litie (See instructions)	Employer (See instructions	')		
	Date 02/23/2025	Full name of contributor out-of-state PAC (ID#: Joiner, Diane Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		Lakeway, TX 78738				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/23/2025	Full name of contributor out-of-state PAC (ID#: Joiner, Diane Contributor address; City; State; Zip Code Lakeway, TX 78738			Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 04/23/2025	Full name of contributor out-of-state PAC (ID#: Joiner, Diane Contributor address; City; State; Zip Code Lakeway, TX 78738			Amount of Contribution (\$)	\$25.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/38 Rpt: 18/53	
2	FILER NAME Texas Alliand	ce for Life		3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 04/23/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$25.00
_		Lakeway, TX 78738				
8	Principal occur Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 05/23/2025	Full name of contributor out-of-state PAC (ID#:_ Joiner, Diane Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
	Dringinal occur	Lakeway, TX 78738 pation / Job title (See Instructions)	Employer (See Instructions			
	Retired	oation / Job title (See instructions)	Employer (See instructions	')		
	Date 06/23/2025	Full name of contributor out-of-state PAC (ID#:_ Joiner, Diane Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		Lakeway, TX 78738				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/23/2025	Full name of contributor out-of-state PAC (ID#:_ Juhlke, Debbie Contributor address; City; State; Zip Code Round Rock, TX 78681			Amount of Contribution (\$)	\$125.00
		pation / Job title (See Instructions) purces Director	Employer (See Instructions	5)		
	Date 06/23/2025	Full name of contributor out-of-state PAC (ID#:_ Juhlke, Debbie Contributor address; City; State; Zip Code Round Rock, TX 78681			Amount of Contribution (\$)	\$125.00
		oation / Job title (See Instructions) ources Director	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 16/38 Rpt: 19/53	
2	FILER NAME Texas Allian	ce for Life		3	Filer ID (Ethics Commission 00051076	Filers)
4	Date 01/23/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$50.00
_		San Antonio, TX 78212				
8	Principal occu Bookkeeper	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 02/23/2025	Full name of contributor out-of-state PAC (ID#: Karam, Elyse Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	San Antonio, TX 78212 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Bookkeeper	(======================================		,		
	Date 03/23/2025	Full name of contributor out-of-state PAC (ID#: Karam, Elyse Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		San Antonio, TX 78212				
	Principal occu Bookkeeper	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/23/2025	Full name of contributor out-of-state PAC (ID#:_Karam, Elyse Contributor address; City; State; Zip Code San Antonio, TX 78212			Amount of Contribution (\$)	\$50.00
	Principal occu Bookkeeper	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 05/23/2025	Full name of contributor out-of-state PAC (ID#: Karam, Elyse Contributor address; City; State; Zip Code San Antonio, TX 78212			Amount of Contribution (\$)	\$50.00
	Principal occu Bookkeeper	pation / Job title (See Instructions)	Employer (See Instructions	i)		
		1				

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDULI	E A1
	The Instruc	etion Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 17/38 Rpt: 20/53	
2	FILER NAME Texas Allian	e for Life		3	Filer ID (Ethics Commission 00051076	ı Filers)
4	Date 01/23/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$10.00
_		Austin, TX 78737	10.5 1 10 1 11	Ĺ		
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 02/23/2025	Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$10.00
	Principal occu	Austin, TX 78737 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Retired	nation, our title (coo monations)	Employer (eee meadedone	٥,		
	Date 03/23/2025	Full name of contributor out-of-state PAC (ID Kruczek, Loraine Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
		Austin, TX 78737				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 04/23/2025	Full name of contributor out-of-state PAC (ID Kruczek, Loraine Contributor address; City; State; Zip Code Austin, TX 78737	#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 05/23/2025	Full name of contributor out-of-state PAC (ID Kruczek, Loraine Contributor address; City; State; Zip Code Austin, TX 78737			Amount of Contribution (\$)	\$10.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 18/38 Rpt: 21/53	
2	FILER NAME Texas Allian	ce for Life		3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 06/23/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$10.00
_	Detectional	Austin, TX 78737	D. Farabasas (Carabasas Sanatas			
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 01/23/2025	Full name of contributor out-of-state PAC (IE Lopez, Michelle Contributor address; City; State; Zip Code Buda, TX 78610	D#:)		Amount of Contribution (\$)	\$208.34
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Self employe	d				
	Date 02/23/2025	Full name of contributor out-of-state PAC (IE Lopez, Michelle Contributor address; City; State; Zip Code)·····································		Amount of Contribution (\$)	\$208.34
		Buda, TX 78610				
	Principal occu Self employe	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/23/2025	Full name of contributor out-of-state PAC (IE Lopez, Michelle Contributor address; City; State; Zip Code Buda, TX 78610)		Amount of Contribution (\$)	\$208.34
	Principal occu Self employe	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 04/23/2025	Full name of contributor out-of-state PAC (IE Lopez, Michelle Contributor address; City; State; Zip Code Buda, TX 78610	D#:)		Amount of Contribution (\$)	\$208.34
	Principal occu Self employe	oation / Job title (See Instructions) d	Employer (See Instructions	s)		
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	MONET	ARY POLITICAL CONTRIE	BUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complet	te this foi	rm.	1	Total pages Schedule A1: Sch: 19/38 Rpt: 22/53	
2	FILER NAME Texas Allian	ce for Life			3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 05/23/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$208.34
8	Principal occu	Buda, TX 78610 pation / Job title (See Instructions)	9	Employer (See Instructions	 ;)		
	Self employe	d					
	Date 06/23/2025	Lopez, Michelle	PAC (ID#:)		Amount of Contribution (\$)	\$208.34
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Self employe	d					
	Date 01/23/2025	Full name of contributor out-of-state Manning, Lillian Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$10.00
		San Marcos, TX 78666					
	Principal occu Religious Sis	pation / Job title (See Instructions) ter		Employer (See Instructions	5)		
	Date 02/23/2025	Full name of contributor out-of-state Manning, Lillian Contributor address; City; State; Zip Code San Marcos, TX 78666				Amount of Contribution (\$)	\$10.00
	Principal occu Religious Sis	oation / Job title (See Instructions) ter		Employer (See Instructions	5)		
	Date 03/23/2025	Full name of contributor out-of-state Manning, Lillian Contributor address; City; State; Zip Code San Marcos, TX 78666)		Amount of Contribution (\$)	\$10.00
	Principal occu Religious Sis	oation / Job title (See Instructions) ter		Employer (See Instructions	5)		
			L				

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDULI	E A1
	The Instruc	ction Guide explains how to complete thi	is form.	1	Total pages Schedule A1: Sch: 20/38 Rpt: 23/53	
2	FILER NAME Texas Allian	ce for Life		3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 04/23/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$10.00
8	Principal occu	San Marcos, TX 78666 pation / Job title (See Instructions)	9 Employer (See Instruction:	ns)		
	Religious Sis		, , , , , , , , , , , , , , , , , , ,	-,		
	Date 05/23/2025	Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$10.00
	Dringinal accu	San Marcos, TX 78666	Employor (Soo Instruction).c)		
	Religious Sis	pation / Job title (See Instructions) ter	Employer (See Instruction:	15)		
	Date 06/23/2025	Full name of contributor out-of-state PAC (I Manning, Lillian Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$10.00
		San Marcos, TX 78666				
	Principal occu Religious Sis	pation / Job title (See Instructions)	Employer (See Instruction	ns)		
	Date 06/23/2025	Full name of contributor out-of-state PAC (I Masters, Glenn Contributor address; City; State; Zip Code Abilene, TX 79604	D#:)		Amount of Contribution (\$)	\$10.00
	Principal occu NA	pation / Job title (See Instructions)	Employer (See Instruction	ns)		
	Date 01/23/2025	Full name of contributor out-of-state PAC (I Maxey, Sherri Contributor address; City; State; Zip Code Jarrell, TX 76537	D#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Office Manag	pation / Job title (See Instructions)	Employer (See Instruction:	ns)		
	Soc Mana(,				

	MONET	ARY POLITICAL CONTR	IBUTION	IS		SCHEDULE	■ A1
	The Instruc	tion Guide explains how to comp	lete this for	m.	1	Total pages Schedule A1: Sch: 21/38 Rpt: 24/53	
2	FILER NAME Texas Alliand	e for Life			3	Filer ID (Ethics Commission 00051076	Filers)
4	Date 02/23/2025	Maxey, Sherri 6 Contributor address; City; State; Zip Cod)	7	Amount of Contribution (\$)	\$10.00
8	Principal occur	Jarrell, TX 76537 pation / Job title (See Instructions)	9	Employer (See Instructions	<u>.</u>		
Ĭ	Office Manag			Employer (Goo meadoann	,		
	Date 05/23/2025	McClaskey, Richard)		Amount of Contribution (\$)	\$50.00
		Driftwood, TX 78619					
	Principal occur Consulting	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/23/2025	Full name of contributor out-of-state McClaskey, Richard Contributor address; City; State; Zip Cod	ate PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Driftwood, TX 78619					
	Principal occu Consulting	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 01/23/2025	Medford, Brad)		Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 02/23/2025	Medford, Brad)		Amount of Contribution (\$)	\$25.00
	Principal occu CEO	oation / Job title (See Instructions)		Employer (See Instructions	5)		
			,				

	MONET	ARY POLITICAL CONTRIBUT	TONS		SCHEDULI	E A1
	The Instruc	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 22/38 Rpt: 25/53	
2	FILER NAME Texas Alliand	ce for Life		3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 03/23/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$25.00
_		Cedar Park, TX 78641		Ţ		
8	Principal occu CEO	pation / Job title (See Instructions)	9 Employer (See Instruction:	is)		
	Date 04/23/2025	Full name of contributor out-of-state PAC (II Medford, Brad Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$25.00
	Dringing age	Cedar Park, TX 78641	Employer (Co.) Instruction	<u>-5)</u>		
	CEO	pation / Job title (See Instructions)	Employer (See Instruction:	15)		
	Date 05/23/2025	Full name of contributor out-of-state PAC (II Medford, Brad Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$25.00
		Cedar Park, TX 78641				
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instruction	ıs)		
	Date 06/23/2025	Full name of contributor out-of-state PAC (II Medford, Brad Contributor address; City; State; Zip Code Cedar Park, TX 78641	D#:)		Amount of Contribution (\$)	\$25.00
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instruction	ıs)		
	Date 05/23/2025	Full name of contributor out-of-state PAC (II Miller, Tina Contributor address; City; State; Zip Code Lakeway, TX 78734	D#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instruction	is)		
			•			

	MONET	ARY POLITICAL CO	ONTRIBUTIO	NS		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to	o complete this fo	rm.	1	Total pages Schedule A1: Sch: 23/38 Rpt: 26/53	
2	FILER NAME Texas Allian	ce for Life			3	Filer ID (Ethics Commission 00051076	Filers)
4	Date 06/23/2025	5 Full name of contributor Miller, Tina6 Contributor address; City; State			7	Amount of Contribution (\$)	\$25.00
_	Delicalization	Lakeway, TX 78734		. Faralana (Cara la densità an	<u></u>		
8	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 01/23/2025	Full name of contributor Moreland, Ronda Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code)		Amount of Contribution (\$)	\$50.00
	Deinsinal assu	Dallas, TX 75218		Frankriger (Cookersteine	<u></u>		
	Radio Produ	pation / Job title (See Instructions) cer		Employer (See Instructions	5)		
	Date 02/23/2025	Full name of contributor Moreland, Ronda Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$50.00
		Dallas, TX 75218					
	Principal occu Radio Produ	pation / Job title (See Instructions) cer		Employer (See Instructions	5)		
	Date 03/23/2025	Full name of contributor Moreland, Ronda Contributor address; City; State Dallas, TX 75218)		Amount of Contribution (\$)	\$50.00
	Principal occu Radio Produ	pation / Job title (See Instructions) cer		Employer (See Instructions	5)		
	Date 05/14/2025	Full name of contributor Moreland, Ronda Contributor address; City; State Dallas, TX 75218	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Radio Produ	pation / Job title (See Instructions) cer		Employer (See Instructions	s)		

	MONEI	ARY POLITICAL (CONTRIBUTION)NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 24/38 Rpt: 27/53	
2	FILER NAME Texas Allian	ce for Life			3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 05/23/2025	5 Full name of contributor Moreland, Ronda6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$50.00
8	Principal occu Radio Produ	Dallas, TX 75218 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> s)		
	Date 06/23/2025	Full name of contributor Moreland, Ronda Contributor address; City; S Dallas, TX 75218	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00
	Principal occu Radio Produ	pation / Job title (See Instructions cer)	Employer (See Instructions	i)		
	Date 01/23/2025	Full name of contributor Pojman, Joe (Dr.) Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$100.00
	Principal occu	Austin, TX 78728 pation / Job title (See Instructions	·)	Employer (See Instructions	 - s)		
	Executive Di	rector		Texas Alliance for Life,	Inc		
	Date 02/23/2025	Full name of contributor Pojman, Joe (Dr.) Contributor address; City; S Austin, TX 78728	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$100.00
	Principal occu Executive Di	pation / Job title (See Instructions rector)	Employer (See Instructions Texas Alliance for Life, I			
	Date 03/23/2025	Full name of contributor Pojman, Joe (Dr.) Contributor address; City; Si Austin, TX 78728	out-of-state PAC (ID#:_ate; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu Executive Di	pation / Job title (See Instructions rector)	Employer (See Instructions Texas Alliance for Life, I			

	MONET	ARY POLITICAL (CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 25/38 Rpt: 28/53	
2	FILER NAME Texas Allian	ce for Life			3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 04/23/2025	5 Full name of contributor Pojman, Joe (Dr.)6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	7	Amount of Contribution (\$)	\$100.00
_		Austin, TX 78728)	5 1 (0 1 1 1	Ĺ		
8	Executive Di	pation / Job title (See Instructions rector) [9	Employer (See Instructions Texas Alliance for Life,			
	Date 05/23/2025	Full name of contributor Pojman, Joe (Dr.) Contributor address; City; St Austin, TX 78728)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>l</u> s)		
	Executive Di	rector		Texas Alliance for Life,	Inc		
	Date 06/23/2025	Full name of contributor Pojman, Joe (Dr.) Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$100.00
	Delegate at a second	Austin, TX 78728	,	Faralasas (Caralasatasatian	<u> </u>		
	Executive Di	pation / Job title (See Instructions rector)	Employer (See Instructions Texas Alliance for Life,			
	Date 01/23/2025	Full name of contributor Ransdell, James Contributor address; City; St Seguin, TX 78155	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 02/23/2025	Full name of contributor Ransdell, James Contributor address; City; St Seguin, TX 78155	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Retired	pation / Job title (See Instructions		Employer (See Instructions	s)		
			,				

	MONET	ARY POLITICAL CONTRIB	BUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complet	e this for	m.	1	Total pages Schedule A1: Sch: 26/38 Rpt: 29/53	
2	FILER NAME Texas Allian	ce for Life			3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 03/23/2025	 Full name of contributor out-of-state F Ransdell, James Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$50.00
_	Duinning Langu	Seguin, TX 78155	ا		<u></u>		
8	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 04/23/2025	Full name of contributor out-of-state F Ransdell, James Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$50.00
	Dringing! goog	Seguin, TX 78155	1	Employer (See Instructions	·/		
	Retired	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 05/23/2025	Full name of contributor out-of-state F Ransdell, James Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Seguin, TX 78155					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/23/2025	Full name of contributor out-of-state F Ransdell, James Contributor address; City; State; Zip Code Seguin, TX 78155	-)		Amount of Contribution (\$)	\$50.00
	Principal occu Retired	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 01/23/2025	Full name of contributor out-of-state F Roady, Jack Contributor address; City; State; Zip Code Sante Fe, TX 77510				Amount of Contribution (\$)	\$100.00
		pation / Job title (See Instructions) ney/Galveston County		Employer (See Instructions	5)		
			I				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 27/38 Rpt: 30/53	
2	FILER NAME Texas Alliand	ce for Life		3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 02/23/2025	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
_		Sante Fe, TX 77510				
8		pation / Job title (See Instructions) ney/Galveston County	9 Employer (See Instructions)		
	Date 03/23/2025	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	Sante Fe, TX 77510 Dation / Job title (See Instructions)	Employer (See Instructions)		
	District Attori	ney/Galveston County				
	Date 04/23/2025	Full name of contributor out-of-state PAC (ID#:_ Roady, Jack Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Sante Fe, TX 77510				
		pation / Job title (See Instructions) ney/Galveston County	Employer (See Instructions)		
	Date 05/23/2025	Full name of contributor out-of-state PAC (ID#:_Roady, Jack Contributor address; City; State; Zip Code Sante Fe, TX 77510)		Amount of Contribution (\$)	\$100.00
		pation / Job title (See Instructions) ney/Galveston County	Employer (See Instructions)		
	Date 06/23/2025	Full name of contributor out-of-state PAC (ID#:_Roady, Jack Contributor address; City; State; Zip Code Sante Fe, TX 77510			Amount of Contribution (\$)	\$100.00
		pation / Job title (See Instructions) ney/Galveston County	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete t	his form.	1	Total pages Schedule A1: Sch: 28/38 Rpt: 31/53	
2	FILER NAME Texas Allian	ce for Life		3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 01/23/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$25.00
_	Delicalization	Austin, TX 78757	0 Franks (0)			
8	Retired	pation / Job title (See Instructions)	9 Employer (Se	ee instructions)		
	Date 02/23/2025	Full name of contributor out-of-state PAC Robinson, Becky Contributor address; City; State; Zip Code	(ID#:)	Amount of Contribution (\$)	\$25.00
	Dringing agg	Austin, TX 78757	Employer (Se	no Instructions)		
	Retired	pation / Job title (See Instructions)	Employer (Se	ee Instructions)		
	Date 03/23/2025	Full name of contributor out-of-state PAC Robinson, Becky Contributor address; City; State; Zip Code	(ID#:		Amount of Contribution (\$)	\$25.00
		Austin, TX 78757				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (Se	ee Instructions)		
	Date 04/23/2025	Full name of contributor out-of-state PAC Robinson, Becky Contributor address; City; State; Zip Code Austin, TX 78757	(ID#:		Amount of Contribution (\$)	\$25.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (Se	ee Instructions)		
	Date 05/23/2025	Full name of contributor out-of-state PAC Robinson, Becky Contributor address; City; State; Zip Code Austin, TX 78757	(ID#:		Amount of Contribution (\$)	\$25.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (Se	ee Instructions)		
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	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 29/38 Rpt: 32/53	
2	FILER NAME Texas Alliand	ce for Life		3	Filer ID (Ethics Commission 00051076	Filers)
4	Date 06/23/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$25.00
_	Delicational	Austin, TX 78757	2. England (Carl Instruction	Ĺ		
8	Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 01/23/2025	Full name of contributor out-of-state PAC (ID#: Rocha, Bebe Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Dringing aggr	Georgetown, TX 78633	Employer (See Instructions	_		
	Executive As	pation / Job title (See Instructions) sistant	Employer (See Instructions	')		
	Date 02/23/2025	Full name of contributor out-of-state PAC (ID#: Rocha, Bebe Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
		Georgetown, TX 78633				
	Principal occu Executive As	pation / Job title (See Instructions) sistant	Employer (See Instructions	i)		
	Date 03/23/2025	Full name of contributor out-of-state PAC (ID#:Rocha, Bebe Contributor address; City; State; Zip Code Georgetown, TX 78633)		Amount of Contribution (\$)	\$25.00
	Principal occu Executive As	oation / Job title (See Instructions) sistant	Employer (See Instructions)		
	Date 04/23/2025	Full name of contributor out-of-state PAC (ID#: Rocha, Bebe Contributor address; City; State; Zip Code Georgetown, TX 78633			Amount of Contribution (\$)	\$25.00
	Principal occu Executive As	pation / Job title (See Instructions) sistant	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	■ A1
	The Instruc	etion Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 30/38 Rpt: 33/53	
2	FILER NAME Texas Alliand	e for Life		3	Filer ID (Ethics Commission 00051076	Filers)
4	Date 05/23/2025	 Full name of contributor out-of-state PAC (ID#: Rocha, Bebe Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$25.00
0	Dringing aggr	Georgetown, TX 78633	Employer (See Instructions	·/		
0	Executive As	pation / Job title (See Instructions) sistant	9 Employer (See Instructions	·)		
	Date 06/23/2025	Full name of contributor out-of-state PAC (ID#: Rocha, Bebe Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occur	Georgetown, TX 78633 pation / Job title (See Instructions)	Employer (See Instructions	·/_		
	Executive As		Employer (See instructions	·)		
	Date 01/23/2025	Full name of contributor out-of-state PAC (ID#: Schulze, James Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		Conroe, TX 77304				
	Principal occu Veterinarian	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 02/23/2025	Full name of contributor out-of-state PAC (ID#: Schulze, James Contributor address; City; State; Zip Code Conroe, TX 77304)		Amount of Contribution (\$)	\$25.00
	Principal occu Veterinarian	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/23/2025	Full name of contributor out-of-state PAC (ID#: Schulze, James Contributor address; City; State; Zip Code Conroe, TX 77304			Amount of Contribution (\$)	\$25.00
	Principal occu Veterinarian	oation / Job title (See Instructions)	Employer (See Instructions	5)		
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	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 31/38 Rpt: 34/53	
2	FILER NAME Texas Allian	ce for Life		3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 04/23/2025	 Full name of contributor	_	7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Conroe, TX 77304 pation / Job title (See Instructions)	9 Employer (See Instructions	-, 		
0	Veterinarian	Janott / Job title (See Instructions)	5 Employer (See instructions	·)		
	Date 05/23/2025	Full name of contributor		•	Amount of Contribution (\$)	\$25.00
		Conroe, TX 77304	1			
	Principal occu Veterinarian	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/23/2025	Full name of contributor out-of-state PAC (ID#: Schulze, James Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$25.00
		Conroe, TX 77304				
	Principal occu Veterinarian	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 02/05/2025	Full name of contributor out-of-state PAC (ID#: Shirk, Lynn Contributor address; City; State; Zip Code Bastrop, TX 78602)	•	Amount of Contribution (\$)	\$100.00
	Principal occu RE Appraise	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 05/13/2025	Full name of contributor out-of-state PAC (ID#: Shirk, Lynn Contributor address; City; State; Zip Code Bastrop, TX 78602			Amount of Contribution (\$)	\$200.00
	Principal occu RE Appraise	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			1			

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDULI	E A1
	The Instruc	tion Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 32/38 Rpt: 35/53	
2	FILER NAME Texas Alliand	e for Life		3	Filer ID (Ethics Commission 00051076	ı Filers)
4	Date 05/23/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
_	Dringing! aggs	Bastrop, TX 78602	0 Employer (See Instructions	<u></u>		
8	RE Appraise	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 06/23/2025	Full name of contributor out-of-state PAC (ID: Shirk, Lynn Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$50.00
		Bastrop, TX 78602	_			
	Principal occu RE Appraise	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 01/23/2025	Full name of contributor out-of-state PAC (ID: Skowbo, James Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$25.00
		Georgetown, TX 78633				
	Principal occu Self Employe	oation / Job title (See Instructions) d	Employer (See Instructions	s)		
	Date 02/23/2025	Full name of contributor out-of-state PAC (ID: Skowbo, James Contributor address; City; State; Zip Code Georgetown, TX 78633	#:)		Amount of Contribution (\$)	\$25.00
	Principal occu Self Employe	oation / Job title (See Instructions) d	Employer (See Instructions	s)		
	Date 03/23/2025	Full name of contributor out-of-state PAC (ID: Skowbo, James Contributor address; City; State; Zip Code Georgetown, TX 78633	#:)		Amount of Contribution (\$)	\$25.00
	Principal occu Self Employe	ation / Job title (See Instructions)	Employer (See Instructions	s)		
			1			

	MONET	ARY POLITICAL CONTRIBUTI	IONS		SCHEDULI	E A1
	The Instruc	etion Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 33/38 Rpt: 36/53	
2	FILER NAME Texas Allian	e for Life		3	Filer ID (Ethics Commission 00051076	n Filers)
4	Date 04/23/2025	 Full name of contributor		7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Georgetown, TX 78633 pation / Job title (See Instructions)	9 Employer (See Instructions	 s)		
	Date 05/23/2025	Full name of contributor out-of-state PAC (IDSkowbo, James			Amount of Contribution (\$)	\$25.00
	Principal occu	Georgetown, TX 78633 pation / Job title (See Instructions)	Employer (See Instructions	 s)		
	Self Employe			<u></u>		
	Date 06/23/2025	Full name of contributor out-of-state PAC (ID Skowbo, James Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$25.00
		Georgetown, TX 78633				
	Principal occu Self Employe	oation / Job title (See Instructions) d	Employer (See Instructions	s)		
	Date 01/23/2025	Full name of contributor out-of-state PAC (IDSmith, Clark Contributor address; City; State; Zip Code Austin, TX 78750	#:)		Amount of Contribution (\$)	\$25.00
	Principal occu Attorney	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 02/23/2025	Full name of contributor out-of-state PAC (ID Smith, Clark Contributor address; City; State; Zip Code Austin, TX 78750	#:)		Amount of Contribution (\$)	\$25.00
	Principal occu Attorney	oation / Job title (See Instructions)	Employer (See Instructions	s)		
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	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE		
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 34/38 Rpt: 37/53		
2	FILER NAME Texas Allian	ce for Life		3	Filer ID (Ethics Commission 00051076	ı Filers)	
4	Date 03/23/2025	5 Full name of contributor out-of-state PAC (ID#:) Smith, Clark 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00	
_	Delicalization	Austin, TX 78750	le Faralana (On Instruction	$\overline{\Gamma}$			
8	Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 04/23/2025 Smith, Clark Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00		
	Austin, TX 78750 Principal occupation / Job title (See Instructions) Employer (See Instructions)		:) 				
Attorney Employer (See Instructions)				',			
	Date 05/23/2025				Amount of Contribution (\$)	\$25.00	
		Austin, TX 78750					
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 06/23/2025	Full name of contributor out-of-state PAC (ID#:_Smith, Clark Contributor address; City; State; Zip Code Austin, TX 78750)		Amount of Contribution (\$)	\$25.00	
	Principal occupation / Job title (See Instructions) Attorney Employer (See Instruction			5)			
	Date 01/23/2025	Full name of contributor out-of-state PAC (ID#:_Umstattd, Thomas Contributor address; City; State; Zip Code Cedar Park, TX 78613			Amount of Contribution (\$)	\$50.00	
	Principal occu Podcaster	pation / Job title (See Instructions)	Employer (See Instructions	5)			
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	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUL		
	The Instru	The Instruction Guide explains how to complete this form.			pages Schedule A1: 35/38 Rpt: 38/53		
2	FILER NAME Texas Allian	ce for Life		3 Filer II 0005:	C (Ethics Commission 1076	n Filers)	
4	Date 02/13/2025	5 Full name of contributor out-of-state PAC (ID#:) Umstattd, Thomas 6 Contributor address; City; State; Zip Code		_) 7 Amou	nt of Contribution (\$)	\$50.00	
_		Cedar Park, TX 78613	<u> </u>				
8	Principal occu Podcaster	pation / Job title (See Instructions)	9 Employer (See Instru	ictions)			
	Date Full name of contributor out-of-state PAC (ID#:) 03/23/2025 Umstattd, Thomas Contributor address; City; State; Zip Code		_) Amou	nt of Contribution (\$)	\$50.00		
	Cedar Park, TX 78613						
	Principal occu Podcaster	pation / Job title (See Instructions)	Employer (See Instru	ictions)			
	Date 04/23/2025			_) Amou	nt of Contribution (\$)	\$50.00	
		Cedar Park, TX 78613					
	Principal occu Podcaster	pation / Job title (See Instructions)	Employer (See Instru	ictions)			
	Date 05/23/2025 Full name of contributor out-of-state PAC (ID#:) Umstattd, Thomas Contributor address; City; State; Zip Code		_) Amou	nt of Contribution (\$)	\$50.00		
Cedar Park, TX 78613 Principal occupation / Job title (See Instructions) Employer (See Instruction Podcaster			ictions)				
	Date Full name of contributor out-of-state PAC (ID#:) Umstattd, Thomas Contributor address; City; State; Zip Code Cedar Park, TX 78613		_) Amou	nt of Contribution (\$)	\$50.00		
	Principal occu Podcaster	pation / Job title (See Instructions)	Employer (See Instru	ictions)			
			1				

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A		
	The Instruc	The Instruction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 36/38 Rpt: 39/53	
2	FILER NAME Texas Alliand	ce for Life		3	Filer ID (Ethics Commission 00051076	Filers)
4	Date 01/23/2025			7	Amount of Contribution (\$)	\$50.00
_	5	Georgetown, TX 78626				
8	Principal occupation / Job title (See Instructions) Writer 9 Employer (See Instructions))			
	Date Full name of contributor out-of-state PAC (ID#:) 02/23/2025 Wheatley, Elisabeth Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00	
	Georgetown, TX 78626					
	Writer	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/23/2025				Amount of Contribution (\$)	\$50.00
		Georgetown, TX 78626				
	Principal occu Writer	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 04/23/2025 Wheatley, Elisabeth Contributor address; City; State; Zip Code Georgetown, TX 78626				Amount of Contribution (\$)	\$50.00
	Principal occu Writer	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 05/23/2025	Full name of contributor out-of-state PAC (ID#: Wheatley, Elisabeth Contributor address; City; State; Zip Code Georgetown, TX 78626			Amount of Contribution (\$)	\$50.00
	Principal occu Writer	pation / Job title (See Instructions)	Employer (See Instructions)		
		•				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE		
	The Instruc	The Instruction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 37/38 Rpt: 40/53		
2	FILER NAME Texas Allian	ce for Life		3	Filer ID (Ethics Commission 00051076	ı Filers)	
4	Date 01/23/2025			7	Amount of Contribution (\$)	\$50.00	
8	Principal occu	Jonestown, TX 78645 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			
	Retired Past			,			
	Date Full name of contributor out-of-state PAC (ID#:) 02/23/2025 Wilson, Roger Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00		
	Jonestown, TX 78645		·)				
Principal occupation / Job title (See Instructions) Employer (See Instruction Retired Pastor				')			
	Date 03/23/2025				Amount of Contribution (\$)	\$50.00	
		Jonestown, TX 78645					
	Principal occu Retired Past	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 04/23/2025	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00	
Principal occupation / Job title (See Instructions) Retired Pastor Employer (See Instruction				<u>(</u>			
	Date 05/23/2025	Full name of contributor out-of-state PAC (ID#:_ Wilson, Roger Contributor address; City; State; Zip Code Jonestown, TX 78645)		Amount of Contribution (\$)	\$50.00	
	Principal occu Retired Past	pation / Job title (See Instructions)	Employer (See Instructions)			
	. toured r date						

		SCHEDUL	E A1	
The Instructio	n Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 38/38 Rpt: 41/53	
2 FILER NAME Texas Alliance fo	or Life		3 Filer ID (Ethics Commission 00051076	ı Filers)
06/23/2025			7 Amount of Contribution (\$)	\$50.00
	Jonestown, TX 78645	O Familia va (Can Institutationa		
Retired Pastor	n / Job title (See Instructions)	9 Employer (See Instructions	ns)	

PLEDG	SED CONTRIBUTI	IONS			SCHEDULE B		
The	The Instruction Guide explains how to complete this form.				1 Total pages Schedule B: Sch: 1/2 Rpt: 42/53		
2 FILER NAMI Texas Allia	P. FILER NAME Texas Alliance for Life			3 Filer ID (Eth 00051076	nics Commission Filers)		
4 TOTAL O	F UNITEMIZED PLEDGE	is .		\$	0.00		
5 Date	6 Full name of pledgor Cortez, Able	out-of-state PAC (ID#:_		8 Amount of pledge (\$) \$625.00	9 In-kind description (If applicable)		
01/10/2025	7 Pledgor Address;	City; State; Zip Code		Ψ023.00			
	Austin, TX 78717			Check if travel outs	side of Texas. Complete Schedule T.		
10 Principal occupation / Job title (See Instructions)11 Employer (See InstruProgram DirectorAbel Care Conce							
5 Date	6 Full name of pledgor Juhlke, Debbie	out-of-state PAC (ID#:_		8 Amount of pledge (\$)	9 In-kind description (If applicable)		
7 Pledgor Address; City; State; Zip Code \$500.00 i				 			
	Round Rock, TX 78681		1	<u> </u>	side of Texas. Complete Schedule T.		
10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions) Human Resources Director 12 Employer (See Instructions)							
5 Date	6 Full name of pledgor	out-of-state PAC (ID#:_)	8 Amount of pledge (\$)	9 In-kind description (If applicable)		
	McClaskey, Richard 7 Pledgor Address;	City; State; Zip Code		\$300.00	i		
04/23/2025				_			
	Driftwood, TX 78619		1	<u> </u>	side of Texas. Complete Schedule T.		
10 Principal occ	cupation / Job title (See Instruction	ons)	11 Employer (See Instru	ıctions)			
5 Date	6 Full name of pledgor Miller, Tina	out-of-state PAC (ID#:_		8 Amount of pledge (\$)	9 In-kind description (If applicable)		
06/23/2025	7 Pledgor Address;	City; State; Zip Code		\$120.00	 		
	Lakeway, TX 78734			Check if travel outs	i side of Texas. Complete Schedule T.		
10 Principal occ retired	cupation / Job title (See Instruction	ons)	11 Employer (See Instru	ictions)			

PLEDO	GED CONTRIBU	ΓIONS			SCHEDULE B
The	The Instruction Guide explains how to complete this form.				dule B: 8/53
	FILER NAME Texas Alliance for Life			3 Filer ID (Ethi 00051076	ics Commission Filers)
4	F UNITEMIZED PLEDG	ES		\$	0.00
5 Date	6 Full name of pledgor Patridge, John	out-of-state PAC (ID#:)	8 Amount of pledge (\$)	9 In-kind description (If applicable)
04/23/2025	7 Pledgor Address;	City; State; Zip Code		\$2,500.00	
	Spicewood, TX 78669			Check if travel outs	i i ide of Texas. Complete Schedule T.
10 Principal oc business o	cupation / Job title (See Instruc wner	ctions)	11 Employer (See Instru	ctions)	
5 Date	6 Full name of pledgor	out-of-state PAC (ID#:)	8 Amount of	9 In-kind description
	Shirk, Lynn			pledge (\$)	(If applicable)
	7 Pledgor Address;	City; State; Zip Code		\$600.00	
05/01/2025		, , ,			
	Bastropo, TX 78602			Check if travel outs	ide of Texas. Complete Schedule T.
10 Principal oc	cupation / Job title (See Instru	ctions)	11 Employer (See Instru	ctions)	
RE Apprai	ser				

NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C4

\vdash					
	The Instruction Guide explains how to complete this form.			Total pages S Sch: 1/1 Rp	Schedule C4: ot: 44/53
2	FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Texas Allian	ce for Life		00051076	
4	Date	5 Corporation / Labor Organization name	6	Amount (\$)	
	01/30/2025	Texas Alliance for Life, Inc.			400.00
r	Date	Corporation / Labor Organization name		Amount (\$)	
	02/28/2025	Texas Alliance for Life, Inc.			400.00
	Date	Corporation / Labor Organization name		Amount (\$)	
	03/31/2025	Texas Alliance for Life, Inc.			400.00
Г	Date	Corporation / Labor Organization name		Amount (\$)	
	04/30/2025	Texas Alliance for Life, Inc.			400.00
\vdash	Date	Corporation / Labor Organization name		Amount (\$)	
	05/31/2025	Texas Alliance for Life, Inc.			400.00

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/5 Rpt: 45/53	Texas Alliance for Life 00051076
4 Date	5 Payee name
01/02/2025	Elavon Compliance Services
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$95.28	7300 Chapman Hwy
Expenditure from corporate funds	Knoxville, TN 37920
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
	Merchant services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiditure to beriefit C/Oi	
Date	Payee name
02/03/2025	Elavon Compliance Services
Amount (\$)	Payee address; City; State; Zip Code
\$70.06	7300 Chapman Hwy
Ψ10.00	7300 Chapman Hwy
Expenditure from	
corporate funds	Knoxville, TN 37920
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
	Merchant services
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
03/03/2025	Elavon Compliance Services
Amount (\$)	Payee address; City; State; Zip Code
\$78.98	7300 Chapman Hwy
φ10.90	1000 Chapman Hwy
Expenditure from	
corporate funds	Knoxville, TN 37920
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.
Z. ZIDITORE	Check if Austin, TX, officeholder living expense
	Merchant services
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made by - Git/Awards/Memoriais Expense Printing Expense Travel Out of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment				
orodit odra i dymoni	The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filer	s)		
Sch: 2/5 Rpt: 46/53	Texas Alliance for Life 00051076			
4 Date	5 Payee name			
04/02/2025	Elavon Compliance Services			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$77.78	7300 Chapman Hwy			
Expenditure from corporate funds	Knoxville, TN 37920			
8 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			
	Merchant services			
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OI	H			
Date	Payee name			
05/02/2025	Elavon Compliance Services			
Amount (\$)	Payee address; City; State; Zip Code			
\$72.17	7300 Chapman Hwy			
¥. =.=.	- Coo Chapman This			
Expenditure from	Manualla, TNI 07000			
corporate funds	Knoxville, TN 37920			
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			
	Merchant services			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OI	н			
Date	Payee name			
06/02/2025	Elavon Compliance Services			
Amount (\$)	Payee address; City; State; Zip Code			
\$83.18	7300 Chapman Hwy			
Expenditure from	Knowillo, TN 27020			
corporate funds	Knoxville, TN 37920			
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			
	Merchant services			
Operation Children	Out that the Community of the control of the contro			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H			
onponditure to beliefit 6/01				

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
Sch: 3/5 Rpt: 47/53	Texas Alliance for Life 00051076				
4 Date	5 Payee name				
01/13/2025	Intellipay				
6 Amount (\$)	Payee address; City; State; Zip Code				
\$23.70	12884 Frontrunner Blvd, Suite 220				
Expenditure from corporate funds	Draper, UT 84020				
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				
	Merchant services				
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/O	1				
Date	Payee name				
02/14/2025	Intellipay				
Amount (\$)	Payee address; City; State; Zip Code				
\$22.95	12884 Frontrunner Blvd, Suite 220				
ΨΕΕ.30	12004 Frontamier Biva, Gallo 220				
Expenditure from	December 117 04000				
corporate funds	Draper, UT 84020				
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 Merchant services				
	Welchant Services				
Operation ONE Wife discont	Our stide to 100% as health as a sure				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
03/11/2025	Intellipay				
Amount (\$)	Payee address; City; State; Zip Code				
\$23.35	12884 Frontrunner Blvd, Suite 220				
Expenditure from corporate funds	Draper, UT 84020				
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				
	Merchant services				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/O	1				

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/5 Rpt: 48/53	Texas Alliance for Life 00051076
4 Date	5 Payee name
04/14/2025	Intellipay
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$22.95	12884 Frontrunner Blvd, Suite 220
Expenditure from corporate funds	Draper, UT 84020
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 Merchant services
	Werdhalt Services
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
05/19/2025	Intellipay
Amount (\$)	Payee address; City; State; Zip Code
\$22.95	12884 Frontrunner Blvd, Suite 220
Expenditure from	
corporate funds	Draper, UT 84020
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
	Merchant services
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/24/2025	Intellipay
Amount (\$)	Payee address; City; State; Zip Code
\$20.40	12884 Frontrunner Blvd, Suite 220
Expenditure from	
corporate funds	Draper, UT 84020
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 Merchant services
	ואופוטוומווג שפועונפט
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/5 Rpt: 49/53	Texas Alliance for Life 00051076
4 Date	5 Payee name
01/27/2025	Wells Fargo Business Card
6 Amount (\$) \$801.86	7 Payee address; City; State; Zip Code PO Box 51174
ψου1.ου	FO BOX 31174
Expenditure from corporate funds	Los Angeles, CA 90051-5474
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Credit Card Payment
	Check if Austin, TX, officeholder living expense
	CC payment
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/27/2025	Wells Fargo Business Card
Amount (\$)	Payee address; City; State; Zip Code
\$472.78	PO Box 51174
- Funanditura from	
Expenditure from corporate funds	Los Angeles, CA 90051-5474
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Credit Card Payment
_/	Check if Austin, TX, officeholder living expense
	CC payment
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/10/2025	Wells Fargo Business Card
Amount (\$)	Payee address; City; State; Zip Code
\$2.24	PO Box 51174
Expenditure from corporate funds	Los Angeles, CA 90051-5474
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	CC payment
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
•	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)			
Sch: 1/4 Rpt: 50/53	Texas Alliance for Life			00051076				
4 CREDIT CARD	Name of final	ncial institution		OF UNITEMIZED				
ISSUER	Wells Fargo I	Business Card	EXPEND CHARGE CARD	ED TO A CREDIT	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
Expenditure from corporate funds	\$8.35	02/17/2025						
7 PAYEE	(a) Payee name	(b) Payee a	ddress;	City,	State,	Zip Code		
	Wells Fargo Busine	ess Card	PO Box 53					
				es, CA 90051-5	5474			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descript					
X Political	Accounting/Banking	o. v.io 30	finance ch	arge				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
Expenditure from corporate funds	\$6.88	01/20/2025						
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code	
	Wells Fargo Busine	ess Card	PO Box 51174					
			Los Angeles, CA 90051-5474					
PURPOSE OF	(a) Category		(b) Descript	ion				
EXPENDITURE 	(See Categories listed at the top Accounting/Banking	of this schedule)	finance charge					
X Political	, 1000aag							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	n, TX, officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
Expenditure from corporate funds	\$252.53	01/14/2025						
PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code	
	Twitter Inc		1355 Mark	et Street, Suite	900			
	Twitter, Inc.							
				San Francisco, CA 94103				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Descript					
l <u> </u>	Advertising Expense	or this soriedate)	non-politic	al issue ads				
Political								
X Non-Political	(*) —	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
expenditure to benefit C/OH								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

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

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
	Sch: 2/4 Rpt: 51/53	Texas Alliance for L			00051076			
4	CREDIT CARD ISSUER	Name of financial institution See previous See previous See previous See previous CHARGED TO A CREDIT CARD		\$				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	Paid		
	Expenditure from corporate funds	\$155.20	01/06/2025					
7	PAYEE	(a) Payee name Twitter, Inc.			rket Street, Suite		State,	Zip Code
Ļ	DUDDOSE OF	(a) Cotogony		(b) Descrip	cisco, CA 94103			
8	PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	1 ` ′ .	cal issue ads			
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
	Expenditure from corporate funds	\$159.85	01/01/2025					
	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		Twitter, Inc. 1355 Market Street, Suite 9		900				
		San Franci			cisco, CA 94103			
	PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Descrip	otion cal issue ads			
					_			
L	X Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,	Office hold	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH					Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
	Expenditure from corporate funds	\$227.40	01/21/2025					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Twitter, Inc.		1355 Mai	rket Street, Suite	900		
				San Fran	cisco, CA 94103			
	PURPOSE OF EXPENDITURE	1 ' ' ' '		(b) Description				
	Political	(See Categories listed at the top of this schedule) Advertising Expense		non-politi	cal issue ads			
	X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	xpenditure to benefit C/OH							
		-						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)				
Sch: 3/4 Rpt: 52/53	Texas Alliance for L	00051076							
4 CREDIT CARD ISSUER		Name of financial institution see previous See previous			\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid				
Expenditure from corporate funds	\$2.24	03/20/2025							
7 PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code		
	Wells Fargo Busine	ess Card	PO Box 5	51174					
				les, CA 90051-5	474				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip						
X Political	Accounting/Banking	or the contours,	finance c	narge					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	K, officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid				
Expenditure from corporate funds	\$211.97	01/30/2025							
PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code		
	Twitter, Inc. 1355 Market Street, Su		ket Street, Suite	900					
			San Francisco, CA 94103						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Non-politial ads						
Political	Advertising Expense								
X Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	K, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
expenditure to benefit C/OH		L (1) = 1 (1)	10-0						
PAYMENT Formanditure from	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid				
Expenditure from corporate funds	\$252.43	01/22/2025							
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code		
	Twitter, Inc.		1355 Mai	ket Street, Suite	900				
	i witter, inc.								
	100	San Francisco, CA 94103							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Descrip						
<u> </u>	Accounting/Banking	,	Non-poin	ical issue ads					
	Political								
X Non-Political	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct expenditure to benefit C/OH									
1	•								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	r - Gift	od/Beverage Expense od/Awards/Memorials Expense gal Services	Polling Expense Printing Expense Salaries/Wages/Contract Lab	Tra	avel in District avel Out of District FHER (enter a catego		
		Th	e Instruction Guide explains					
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	ion Filers)
	Sch: 4/4 Rpt: 53/53	Texas Alliance	e for Life			00051076		
4	CREDIT CARD	Name o	of financial institution	5 TOTAL OF UN	IITEMIZED			
	ISSUER		see previous	EXPENDITUR		\$		
		,	ice previous	CHARGED TO CARD) A CREDIT			
6	PAYMENT	(a) Amount Charge	d (b) Date of Charge	(c) Date(s) Credit	Card Issuer	r Paid		
	Expenditure from corporate funds	\$1.20	01/03/2025					
7	PAYEE	(a) Payee name	I.	(b) Payee addres	s;	City,	State,	Zip Code
				2100 Bloomdal	e Rd.			
		Collin County I	District Court					
				McKinney, TX	75071			
8	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at	the top of this schedule)	fee for court do	cuments			
	Political	Fees						
	X Non-Political	(C) Check if travel of	outside of Texas. Complete Schedule	e T. Che	ck if Austin, TX,	officeholder living ex	pense	
9	Complete ONLY if direct	Candidate/Officeh	nolder name C	Office sought		Office held		
e	xpenditure to benefit C/OH							