#### 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) 00089694 3 COMMITTEE NAME **OFFICE USE ONLY** Texans for Truth and Liberty PAC Date Received **ELECTRONICALLY FILED** 07/15/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1108 Lavaca St Date Hand-delivered or Date Postmarked Ste 110-109 Change of Address Austin, TX 78701 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Suzanne NAME NICKNAME LAST **SUFFIX** Shea STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1108 Lavaca Street STREET **ADDRESS** Ste. 110-109 (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1108 Lavaca Street MAILING **ADDRESS** Ste. 110-109 Austin, TX 78701 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 722-3800 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)
Texans for Truth and	Liberty PAC		00089694	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Lulu Flores State Representati	ve	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures  (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders     Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	10,000,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEI	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	965,707.83
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	9,689,377.17
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	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.		
		Ms. Suza	nne Shea	
		Signature of Car	npaign Treasu	rer
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said _	, th	is the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of office	cer administering oath
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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texans for Truth and Lik	berty PAC			00089694	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Nathan Johnson State Senator		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	A. Supported	Judith Zaffirini State Senator		
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Cadilli Zallilli Cado Collaco		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Brandon Creighton State Senat	or	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

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						Page 4 of 32
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texans for Truth and L	iberty PAC				00089694	
14 COMMITTEE ACTIVITY  (Attach lists on plain	Candidates (Identify by name or, if applicable, classify by party.)		Bob Hall State S	enator		
paper to complete this report if necessary.)						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders     Assisted  (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Kelly Hancock C	omptroller		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Brian Hughes St	ate Senator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders     Assisted  (Identify by name or, if applicable, classify by party.)					<del>-</del>

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12 COMMITTEE NAME				13	Filer ID	(Ethics Commission File	rs)
Texans for Truth and Li	berty PAC				00089694		
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Angela Paxton State Se	enator			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported					
		B. Opposed					
	Officeholders     Assisted  (Identify by name or, if applicable, classify by party.)						
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Charles Perry State Ser	nator			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported					
		B. Opposed					
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Harold Dutton State Re	presentative			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported					
		B. Opposed					
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
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12 (	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
-	Texans for Truth and Lil	berty PAC			00089694	
14 (	COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Erin Gamez State Representation	l /e	
-	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
(	COMMITTEE	1. Candidates	A. Supported	Jessica Gonzalez State Repres	entative	
,	ACTIVITY	(Identify by name or, if applicable, classify by party.)				
1	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ann Johnson State Representat	tive	
-	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texans for Truth and Lib	erty PAC				00089694	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Oscar Longoria	State Represen	I Itative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
-	2. Measures	A. Supported				
	(Describe by date and location of election and nature of issue.)					
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	Candidates		Joseph Moody	State Penrecent	rative	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		Joseph Moody	State Nepresent	auve	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders     Assisted (Identify by name or, if					
	applicable, classify by party.)					
ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Ramon Romero	State Represer	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
-	2. Measures	A. Supported				
	(Describe by date and location of election and nature of issue.)					
		B. Opposed				
	3. Officeholders Assisted					
	(Identify by name or, if applicable, classify by party.)					

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texans for Truth and	Liberty PAC				00089694	
14 COMMITTEE ACTIVITY	Candidates  (Identify by name or, if applicable, classify by party.)		Toni Rose S	tate Representativ	/e	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE	1. Candidates	A. Supported	Chris Turner	State Representa	ntive	
ACTIVITY	(Identify by name or, if applicable, classify by party.)			·		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates  (Identify by name or, if applicable, classify by party.)	A. Supported	Drew Darby	State Representa	tive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures     (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)					
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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texans for Truth and Liberty	y PAC				00089694	
ACTIVITY (Iden	Candidates ntify by name or, if icable, classify by party.)	A. Supported	Mark Dorazio S	State Representat	tive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
(Des locat	Measures scribe by date and tion of election and re of issue.)	A. Supported				
		B. Opposed				
(Ider	Officeholders Assisted ntify by name or, if icable, classify by party.)					
COMMITTEE 1.	Candidates	A Supported	Charlie Geren	State Representa	ntivo	
ACTIVITY (Iden	ntify by name or, if icable, classify by party.)	A. Supported	Chanle Geren	State Representa	uive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
(Des locat	Measures scribe by date and tion of election and re of issue.)	A. Supported				
		B. Opposed				
(Ider	Officeholders Assisted ntify by name or, if icable, classify by party.)					
COMMITTEE 1. ACTIVITY (Ider		A. Supported	Janis Holt Stat	e Representative		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
(Des locat	Measures scribe by date and tion of election and re of issue.)	A. Supported				
		B. Opposed				
(Ider	Officeholders Assisted ntify by name or, if icable, classify by party.)					
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COMMITTEE NAME						
	D40				13 Filer ID	(Ethics Commission Filers)
rexans for Truth and Lil	Derty PAC				00089694	
COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Andy Hopper S	State Representat	tive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)					
COMMITTEE	1 Candidates	A Supported	Marc LaHood 9	State Penresenta	tivo	
ACTIVITY	(Identify by name or, if		Wale Lai lood 3	state Representa	uve	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Mitch Little Sta	te Representative	е	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)	(Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  2. Measures (Identify by name or, if applicable, classify by party.)  2. Measures (Identify by name or, if applicable, classify by party.)  2. Measures (Identify by name or, if applicable, classify by party.)  3. Officeholders (Identify by name or, if applicable, classify by party.)  3. Officeholders (Identify by name or, if applicable, classify by party.)  3. Officeholders (Identify by name or, if applicable, classify by party.)  3. Officeholders (Identify by name or, if applicable, classify by party.)	ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE (dentify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (dentify by name or, if applicable, classify by party.)  COMMITTEE (ACTIVITY)  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. 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COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  B. Opposed  3. Officeholders (Identify by name or, if applicable, classify by party.)  B. Opposed  3. Officeholders (Identify by name or, if applicable, classify by party.)  B. Opposed  3. Officeholders (Identify by name or, if applicable, classify by party.)  B. Opposed	ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Identify by name or, if applicable, classify by party.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Identify by name or, if applicable, classify by party.)  COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe thy date and location of election and nature of issue.)  2. 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				13 Filer ID (Ethics Commission Filers)
				00089694
	Candidates (Identify by name or, if applicable, classify by party.)		AJ Louderback State R	epresentative
paper to complete this		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE	1. Candidates	A. Supported	Shellev Luther State Re	epresentative
ACTIVITY	(Identify by name or, if applicable, classify by party.)			F
paper to complete this		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted			
	1. Candidates (Identify by name or, if applicable, classify by party.)		Brent Money State Rep	resentative
paper to complete this		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)	Texans for Truth and Liberty PAC  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  COMMITTEE ACTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  2. Measures (Describe by date and location of election and nature of issue.)  2. Measures (Describe by date and location of election and nature of issue.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted  2. Measures (Identify by name or, if applicable, classify by party.)  2. Measures (Identify by name or, if applicable, classify by party.)  3. Officeholders Assisted  3. Officeholders Assisted  3. Officeholders Assisted	Texans for Truth and Liberty PAC  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  (ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  A. Supported (Identify by name or, if applicable, classify by party.)  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  A. Supported (Identify by name or, if applicable, classify by party.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  B. Opposed  COMMITTEE  A. Supported (Identify by name or, if applicable, classify by party.)  B. Opposed  COMMITTEE  A. Supported (Identify by name or, if applicable, classify by party.)  B. Opposed  COMMITTEE  A. Supported (Identify by name or, if applicable, classify by party.)  B. Opposed  COMMITTEE  A. Supported (Identify by name or, if applicable, classify by party.)  B. Opposed  COMMITTEE  A. Supported (Identify by name or, if applicable, classify by party.)	Texans for Truth and Liberty PAC  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  3. Officeholders Assisted (dentity by name or, if applicable, classify by party.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  A. Supported Brent Money State Report of the part of the

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12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texans for Truth and Liberty PAC			00089694	
14 COMMITTEE 1. Candida (Identify by nam applicable, class	ie or, if	Mike Olcott State Representative	)	
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed			
Measure     (Describe by da location of elect nature of issue.	te and ion and			
	B. Opposed			
3. Officeho Assisted (Identify by nan applicable, clas	e or, if			
COMMITTEE 1. Candida	tes A Sunnorted r	Dr. Tom Oliverson		
ACTIVITY (Identify by namapplicable, class	ie or, if	DI. TOITI Oliveisori		
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed			
2. Measure (Describe by da location of elect nature of issue.	te and ion and			
	B. Opposed			
3. Officeho Assisted (Identify by nam applicable, clas	e or, if			
COMMITTEE 1. Candida (Identify by nan applicable, class	tes A. Supported [	Dade Phelan State Representati	ve	
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed			
2. Measure (Describe by da location of elect nature of issue.	te and ion and			
	B. Opposed			
3. Officeho Assisted (Identify by nan applicable, clas	ie or, if			
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COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texans for Truth and Lib				00089694	
COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Katrina Pierson State Represen	tative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Keresa Richardson State Repre	sentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Tony Tinderholt State Represen	ıtative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
		<u> </u>			

### GENERAL-PURPOSE COMMITTEE REPORT:

## FORM GPAC ADDENDUM

PURPUSE				Page 14 of 32
2 COMMITTEE NAME			13 Filer ID (Ethics C	Commission Filers)
Texans for Truth and L	iberty PAC		00089694	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Wes Virdell State Ro	epresentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures     (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted			
	(Identify by name or, if applicable, classify by party.)			

### **SUBTOTALS - GPAC**

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

			_	15 of 32
	17 COMMITTEE NAME Texans for Truth and Liberty PAC  18 Filer ID ( 00089694		(Ethics Comn	nission Filers)
19 SCHEDULE SUBTOTALS				
	SCHEDULE		SUBTO <sup>-</sup>	TAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	10,000,000.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	)R	\$	
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	\$	965,707.83
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	\$	

MONE	ETARY POLITICAL CONTRIBUT	IONS	SCH	HEDULE <b>A1</b>
The Ins	The Instruction Guide explains how to complete this form.			le A1: 2
2 FILER NA Texans fo	ME or Truth and Liberty PAC		<b>3</b> Filer ID (Ethics Co 00089694	mmission Filers)
4 Date 06/12/20	5 Full name of contributor out-of-state PAC (IE Arnold & Itkin LLP  6 Contributor address; City; State; Zip Code	)#:)	7 Amount of Contribut	sion (\$) \$10,000,000.00
8 Principal o	Houston, TX 77007 ccupation / Job title (See Instructions)	9 Employer (See Instructions	ns)	

### SCHEDULE F1

Advertising Expense

Event Expense

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

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services	se Polling Expens Expense Printing Expens	se s/Contract Labor	Travel in District Travel Out of Di	
1 Tatal marca Cabadula F1.		nuc explains now to comple		2 Files ID	(Ethias Commission Filers)
1 Total pages Schedule F1: Sch: 1/16 Rpt: 17/32	Texans for Truth and Libert	v PAC		3 Filer ID 00089694	(Ethics Commission Filers)
4 Date		, -			
06/26/2025	<ul><li>5 Payee name</li><li>AJ Louderback Campaign</li></ul>				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
\$25,000.00	PO BOX 1792				
Expenditure from corporate funds	Victoria, TX 77902				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Contributions/Donations Ma Candidate/Officeholder/Poli	nde By		utside of Texas. Con TX, officeholder living	•
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name	Office sought		Office h	eld
Date	Payee name				
06/26/2025	Angela Paxton Campaign				
Amount (\$)	Payee address; City;	State; Zip Code			
\$20,000.00	P. O. Box 2878				
Expenditure from corporate funds	McKinney, TX 75070				
PURPOSE OF	(a) Category (See Categories listed at the	ne top of this schedule) (b)	Description		
EXPENDITURE	Contributions/Donations Ma Candidate/Officeholder/Poli			utside of Texas. Con TX, officeholder living	
Complete ONLY if direct	Candidate/Officeholder name	Office sought		Office h	eld
expenditure to benefit C/O					
Date	Payee name				
06/24/2025	Ann Johnson Campaign				
Amount (\$) \$25,000.00	Payee address; City; PO Box 56386	State; Zip Code			
Expenditure from					
corporate funds	Houston, TX 77256				
PURPOSE OF	(a) Category (See Categories listed at the	' '	Description	utalida af Taura Carr	unlata Cabadula T
EXPENDITURE	Contributions/Donations Ma Candidate/Officeholder/Poli		<b>□</b>	utside of Texas. Con TX, officeholder livin	
	5		Campaign cor		
Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name	Office sought		Office h	eld

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Tatal range Cabadula 54:	
1 Total pages Schedule F1: Sch: 2/16 Rpt: 18/32	2 FILER NAME3 Filer ID(Ethics Commission Filers)Texans for Truth and Liberty PAC00089694
4 Date	5 Payee name
06/25/2025	Brent Money for Texas
6 Amount (\$) \$25,000.00	7 Payee address; City; State; Zip Code 2606 Lee Street
Expenditure from corporate funds	Greenville, TX 75401
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/26/2025	Bryan Hughes Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$20,000.00	PO Box 450
Expenditure from corporate funds	Mineola, TX 75773
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/26/2025	Charles Perry Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$10,000.00	P.O. Box 94806
\$10,000.00	F.O. BOX 94000
Expenditure from corporate funds	Lubbock, TX 79493
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

#### 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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4. Tatal manna Cabadala E4.	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1:	
Sch: 3/16 Rpt: 19/32	Texans for Truth and Liberty PAC 00089694
4 Date	5 Payee name
06/25/2025	Charlie Geren Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$25,000.00	P.O. Box 1440
Ψ23,000.00	F.O. DOX 1440
Expenditure from corporate funds	Fort Worth, TX 76101
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/26/2025	Chris Turner Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$10,000.00	P.O. Box 2910
\$10,000.00	P.O. Box 2910
Expenditure from corporate funds	Austin, TX 78768
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/24/2025	Drew Darby Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$25,000.00	136 W. Twohig Avenue
Expenditure from	
corporate funds	San Angelo, TX 76903
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/16 Rpt: 20/32	Texans for Truth and Liberty PAC 00089694
4 Date	5 Payee name
06/24/2025	Erin Gamez for Texas State Representative
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$10,000.00	777 E Harrison Street
Expenditure from corporate funds	Brownsville, TX 78520
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign contribution.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	
Date	Payee name
06/25/2025	FRIENDS OF BRANDON CREIGHTON
Amount (\$)	Payee address; City; State; Zip Code
\$20,000.00	2257 N. LOOP 336
	SUITE 140-366
Expenditure from corporate funds	CONROE, TX 77304
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/25/2025	FedEx
Amount (\$)	Payee address; City; State; Zip Code
\$221.67	110 E 2nd St
Expenditure from corporate funds	Austin, TX 78701
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Payment to mail check.
	aymont to man oncor.
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

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	Gift/Awards/Memorials Expense Printing Expense Travel Out of District OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	
Sch: 5/16 Rpt: 21/32	Texans for Truth and Liberty PAC 00089694
4 Date	5 Payee name
06/26/2025	FedEx
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$57.27	110 E 2nd St
Expenditure from	Austin TV 70701
corporate funds	Austin, TX 78701
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Payment to mail check.
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
06/27/2025	FedEx
Amount (\$)	Payee address; City; State; Zip Code
\$57.27	110 E 2nd St
12.16φ	TIU E ZIIU SI
Expenditure from	
corporate funds	Austin, TX 78701
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payment to mail check.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
06/27/2025	FedEx
Amount (\$)	Payee address; City; State; Zip Code
\$49.50	110 E 2nd St
Evponditure from	
Expenditure from corporate funds	Austin, TX 78701
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payment to mail check.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

### SCHEDULE F1

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

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

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

Credit Card Payment	The Instruction Guide explains how to com	plete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 6/16 Rpt: 22/32	Texans for Truth and Liberty PAC	00089694
4 Date	5 Payee name	•
06/27/2025	FedEx	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$41.05	110 E 2nd St	
Expenditure from corporate funds	Austin, TX 78701	
8 PURPOSE	, , , , , , , , , , , , , , , , , , , ,	Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Payment to mail check.
		r dymont to man check.
Complete ONLY if direct	Condidate/Officeholder name	office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	office held
Date	Payee name	
06/27/2025	FedEx	
Amount (\$)	Payee address; City; State; Zip Code	
\$41.05	110 E 2nd St	
Expenditure from corporate funds	Austin, TX 78701	
PURPOSE	, , ,	Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Payment to mail check.
		r ayment to mair check.
Complete CNI V if direct	Candidate/Officeholder name Office souch	nt Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		n Office field
Date	Payee name	
06/27/2025	FedEx	
Amount (\$)	Payee address; City; State; Zip Code	
\$41.22	110 E 2nd St	
Expenditure from corporate funds	Austin, TX 78701	
PURPOSE		<b>D)</b> Description
OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Zimos di dinasai Enpondo	Check if Austin, TX, officeholder living expense
		Payment to mail check.
Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/OI	4	

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1. Total pages Cabadula 51:		_
1 Total pages Schedule F1:		
Sch: 7/16 Rpt: 23/32	Texans for Truth and Liberty PAC 00089694	
4 Date	5 Payee name	
06/27/2025	FedEx	
6 Amount (\$)	7 Payee address; City; State; Zip Code	_
\$82.10	110 E 2nd St	
Expenditure from corporate funds	Austin, TX 78701	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Payment to mail check.	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experientare to benefit ever		
Date	Payee name	
06/29/2025	FedEx	
Amount (\$)	Payee address; City; State; Zip Code	_
\$116.70	110 E 2nd St	
¥2200		
Expenditure from corporate funds	Austin, TX 78701	
•		_
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expanse  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Payment to mail check.	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
		_
Date	Payee name	
06/25/2025	Friends of Tom Oliverson	
Amount (\$)	Payee address; City; State; Zip Code	
\$25,000.00	11803 Grant Road	
	Ste 201	
Expenditure from corporate funds	Cypress, TX 77429	
•		_
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Contributions/Donations Made By  Contributions/Donations Made By	
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Campaign contribution.	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	-
expenditure to benefit C/OI		
		_
Forms provided by Tayas F	thics Commission WAW athics state ty us Version V/A 1.0 f10d0fr	10

#### 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

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

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
orodic 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 Filers)	)
Sch: 8/16 Rpt: 24/32	Texans for Truth and Liberty PAC 00089694	
4 Date	5 Payee name	
06/24/2025	Harold Dutton Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$10,000.00	3801 Kirby Drive	
	STE 411	
Expenditure from corporate funds	Houston, TX 77098	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
	Campaign contribution.	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	H	
Date	Payee name	
06/26/2025	Hopper4Texas	
Amount (\$)	Payee address; City; State; Zip Code	
\$25,000.00	PO Box 1052	
Expenditure from corporate funds	Decatur, TX 76234	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By	
_/	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
	Campaign contribution.	
Complete ONLY if direct	Condidate/Officeholder nove	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	T	
Date	Payee name	
06/23/2025	Janis Holt Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$10,000.00	PO Box 1311	
- "		
Expenditure from corporate funds	Silsbee, TX 77656	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By	
EXPENDITORE	Candidate/Officeholder/Political Committee	
	Campaign contribution.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
SAPORARIO TO BOTTON O/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 Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 9/16 Rpt: 25/32	Texans for Truth and Liberty PAC 00089694
4 Date	5 Payee name
06/23/2025	Jessica González Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$10,000.00	501 E 8th St
- "	
Expenditure from corporate funds	Dallas, TX 75203
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
LAFENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution.
O Commission ONLY if dispose	Condidate/Office holds
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/23/2025	Katrina Pierson Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$50,000.00	PO Box 672
Expenditure from	
corporate funds	Rockwall, TX 75087
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.  Check if Available TX of fleehelder living supposes
	Candidate/Officeholder/Political Committee Campaign contribution.
	- Callipagi Collaboration
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/23/2025	Keresa for Texas Campaign
	· · ·
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code P.O. Box 1179
\$10,000.00	F.O. Box 1179
Expenditure from	Makingan TV 75070
corporate funds	McKinney, TX 75070
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Campaign contribution.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

#### 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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment													
4 Tatal manua Cabadula E4.	,												
1 Total pages Schedule F1: Sch: 10/16 Rpt: 26/32	2 FILER NAME3 Filer ID(Ethics Commission Filers)Texans for Truth and Liberty PAC00089694												
4 Date	5 Payee name												
06/26/2025	Lulu Flores Campaign												
6 Amount (\$)	7 Payee address; City; State; Zip Code												
\$10,000.00	P.O. Box 40969												
Expenditure from													
corporate funds	Austin, TX 78704												
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description												
OF	Contributions/Donations Made By  Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.												
EXPENDITURE	Candidate/Officeholder/Political Committee												
	Campaign contribution.												
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held												
expenditure to benefit C/O	-i												
Dato	Davies same												
Date	Payee name												
06/30/2025	Marc LaHood Campaign												
Amount (\$)	Payee address; City; State; Zip Code												
\$200,000.00	4014 McCullough Ave												
Expenditure from corporate funds	San Antonio, TX 78212												
•													
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Carettinution of Days at the sea Manufacture of Texas Complete Schedule Texas Complete Sche												
EXPENDITURE  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense													
	Candidate/Officeriolder/Political Committee Campaign contribution.												
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												
06/24/2025	Mark Dorazo Campaign												
Amount (\$)	Payee address; City; State; Zip Code												
\$25,000.00	143 Tower Dr												
, -,													
Expenditure from	Can Astonia TV 70000												
corporate funds	San Antonio, TX 78232												
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description												
EXPENDITURE	Contributions/Donations Made By												
	Candidate/Officeholder/Political Committee												
	Campaign contribution.												
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held												
expenditure to benefit C/OI													

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling 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: 11/16 Rpt: 27/32	Texans for Truth and Liberty PAC 00089694											
4 Date	5 Payee name											
06/28/2025	Mike Olcott Campaign											
6 Amount (\$)	7 Payee address; City; State; Zip Code											
\$25,000.00	PO Box 247											
- 10.												
Expenditure from corporate funds	Aledo, TX 76008											
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description											
OF EXPENDITURE	Contributions/Donations Made By											
EXI ENDITORE	Candidate/Officeholder/Political Committee											
	Campaign contribution.											
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held											
Date	Payee name											
06/23/2025	Mitch Little Campaign											
Amount (\$)	Payee address; City; State; Zip Code											
\$100,000.00	2600 Network BLVD											
	STE 400											
Expenditure from corporate funds	Frisco, TX 75034											
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description											
OF	Contributions/Donations Made By  Contributions/Donations Made By  Contributions/Donations Made By											
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense											
	Campaign contribution.											
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held											
expenditure to benefit C/OI	1											
Date	Payee name											
06/26/2025	Moody for Texas											
Amount (\$)	Payee address; City; State; Zip Code											
\$25,000.00	5675 Woodrow Bean Transmountain											
	#12											
Expenditure from corporate funds	El Paso, TX 79924											
-												
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  Contributions/Donations Made By											
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense											
	Campaign contribution.											
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held											
expenditure to benefit C/O												

### SCHEDULE F1

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

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

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

Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.											
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)											
Sch: 12/16 Rpt: 28/32	Texans for Truth and Liberty PAC 00089694											
4 Date	5 Payee name											
06/26/2025	Morgan 4 Texas											
6 Amount (\$)	7 Payee address; City; State; Zip Code											
\$25,000.00	503 FM 359 Ste. 130											
	#264											
Expenditure from corporate funds	Richmond, TX 77406											
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description											
OF EXPENDITURE	Contributions/Donations Made By											
	Candidate/Officeholder/Political Committee											
	Campaign contribution.											
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H											
Date	Payee name											
06/25/2025	Nathan Johnson Campaign											
Amount (\$)	Payee address; City; State; Zip Code											
\$25,000.00	PO Box 670994											
Ψ23,000.00	FO BOX 070334											
Expenditure from corporate funds	Dallas, TX 75367											
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description											
OF EXPENDITURE	Contributions/Donations Made By											
EXI ENDITORE	Candidate/Officeholder/Political Committee											
	Campaign contribution.											
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held											
expenditure to benefit C/O	1											
Date	Payee name											
06/24/2025	OSCAR LONGORIA CAMPAIGN											
Amount (\$)	Payee address; City; State; Zip Code											
\$10,000.00	P.O. Box 1029											
Ψ10,000.00	1.0. Box 1023											
Expenditure from corporate funds	Penitas, TX 78576											
PURPOSE												
OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  Contributions/Donations Made By											
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense											
	Campaign contribution.											
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held											
expenditure to benefit C/O												

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)											
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 Filers)											
Sch: 13/16 Rpt: 29/32	Texans for Truth and Liberty PAC 00089694											
4 Date	Date 5 Payee name											
06/30/2025	Ramon Romero Campaign											
6 Amount (\$)	7 Payee address; City; State; Zip Code											
\$10,000.00	PO Box 181											
Expenditure from corporate funds	Fort Worth, TX 76101											
8 PURPOSE												
OF	Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas. Complete Schedule T.											
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense											
	Campaign contribution.											
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held											
expenditure to benefit C/OI												
		_										
Date	Payee name											
06/25/2025	Senator Judith Zaffirini Campaign											
Amount (\$)	Payee address; City; State; Zip Code											
\$10,000.00	PO Box 627											
Expenditure from corporate funds	Laredo, TX 78042											
·												
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made Ry  Contributions/Donations Made Ry											
EXPENDITURE	Contributions/Donations Made by											
Candidate/Officeholder/Political Committee Campaign contribution.												
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_										
expenditure to benefit C/OI												
·												
Date	Payee name											
06/23/2025	Shelley Luther Campaign											
Amount (\$)	Payee address; City; State; Zip Code											
\$25,000.00	105 S Britton Street											
	#302											
Expenditure from												
corporate funds	Tom Bean, TX 75489											
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description											
EXPENDITURE	Contributions/Donations Made By											
	Candidate/Officeholder/Political Committee											
	Campaign contribution.											
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held											

#### SCHEDULE F1

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

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment													
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)												
Sch: 14/16 Rpt: 30/32	Texans for Truth and Liberty PAC 00089694												
4 Date	5 Payee name												
06/30/2025	Texans For Dade												
6 Amount (\$)	7 Payee address; City; State; Zip Code												
\$25,000.00	812 North 16th Street												
Expenditure from corporate funds	Orange, TX 77630												
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description												
OF EXPENDITURE	Contributions/Donations Made By												
EXI ENDITORE	Candidate/Officeholder/Political Committee												
	Campaign contribution.												
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held												
experiorure to benefit C/O													
Date	Payee name												
06/26/2025	Texans for Bob Hall												
Amount (\$)	Payee address; City; State; Zip Code												
\$10,000.00	P.O. Box 513												
Expenditure from corporate funds	Canton, TX 75103												
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description												
OF  Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.													
Candidate/Officeholder/Political Committee Campaign contribution.													
	Campaigh contribution.												
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held												
expenditure to benefit C/Ol	· ·												
Date	Payee name												
06/26/2025	Texans for Kelly Hancock												
Amount (\$)	Payee address; City; State; Zip Code												
\$20,000.00	P.O. Box 821349												
Expenditure from corporate funds	North Richland Hills, TX 76182												
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description												
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.												
-	Candidate/Officeholder/Political Committee												
	Campaign continuution.												
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held												
Complete <u>ONLY</u> if direct expenditure to benefit C/OI													

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment												
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)											
Sch: 15/16 Rpt: 31/32	Texans for Truth and Liberty PAC 00089694											
4 Date	5 Payee name											
06/24/2025	Toni Rose Campaign											
6 Amount (\$)	7 Payee address; City; State; Zip Code											
\$10,000.00	P.O. Box 41867											
	Expenditure from											
Expenditure from corporate funds	Dallas, TX 75241											
8 PURPOSE												
OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas. Complete Schedule T.											
EXPENDITURE	Candidate/Officeholder/Political Committee											
	Campaign contribution.											
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held											
expenditure to benefit C/OI	H .											
Date	Payee name											
06/26/2025	Tony Tinderholt for Texas											
Amount (\$)	Payee address; City; State; Zip Code											
\$5,000.00	PO Box 172713											
Expenditure from corporate funds	Arlington, TX 76003											
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description											
EXPENDITURE	Contributions/Donations Made By  Condidate (Office held or (Palitical Composites)  Condidate (Office held or (Palitical Composites)											
	Candidate/Officeholder/Political Committee Campaign contribution.											
	Gampaign commission											
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held											
expenditure to benefit C/O												
Date	Payee name											
06/23/2025	Wes Virdell Campaign											
Amount (\$)	Payee address; City; State; Zip Code											
\$25,000.00	P.O. Box 147											
Expenditure from corporate funds	Brady, TX 76825											
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description											
EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense											
	Candidate/Officeholder/Political Committee											
	Sampaigh continuation.											
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held											
expenditure to benefit C/O												

### 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	ı - I Coı	mmittee	Legal S					xpens Vages	e /Contract Labor ete this form.		Travel Out of D OTHER (enter	istrict a category not liste	d above)
┰	Total pages Schedule F1:	2	FII FR NAME				•		-		3	Filer ID	(Ethics Comn	nission Filers)
	Sch: 16/16 Rpt: 32/32	_	Texans for		and Lih	arty DA0	_				ľ	00089694	(2400 00	
L						City i Ac						00003034		
4	Date	5	Payee name											
l	06/23/2025		Wes Virdel	Camp	oaign									
6	Amount (\$)	7	Payee addre	ss;	City;		State;	Zip Co	ode					
l	\$25,000.00		P.O. Box 1	47										
l														
╓	Expenditure from		Brady, TX	76025										
ഥ	corporate funds													
8	PURPOSE OF	(a)	Category (S					dule)	(b)	Description				
l	EXPENDITURE		Contribution							ш			nplete Schedule T.	
			Candidate/	Officer	nolder/P	olitical (	Commi	ttee				, officeholder livir	g expense	
l										Campaign co	ווווו	ibulion.		
9	Complete ONLY if direct expenditure to benefit C/OI	_ (	Candidate/Off	icehold	er name		Of	ffice sou	ıght			Office h	eld	
	experiulture to benefit C/Oi	<u>'</u>												
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