#### FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00065292 3 COMMITTEE NAME **OFFICE USE ONLY** Texans for Ted Cruz Date Received **ELECTRONICALLY FILED** 07/15/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 341016 Date Hand-delivered or Date Postmarked Austin, TX 78734 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Cabell NAME NICKNAME LAST **SUFFIX** Hobbs STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 14425 Falcon Head Blvd STREET **ADDRESS** Bldg E100 (Residence or Business) Austin, TX 78738 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 341027 MAILING **ADDRESS** Austin, TX 78734 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** 5122776095 PHONE REPORT January 15 30th day before election Exceeded modified reporting limit **TYPE** Dissolution (Attach PAC-DR) 8th day before election X July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Month Year Month Day Year Day COVERED 01/01/2025 **THROUGH** 06/30/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Other Primary Runoff General Special **GO TO PAGE 2**

## SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Com	mission Filers)
Texans for Ted Cruz			00065292		
14 COMMITTEE PURPOSE		CANDIDATE / OFFICEHOLDER NAME Ted Cruz	•		
(Attach lists on plain paper to complete this	X Candidate				
report if necessary.)	Officeholder  OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)  None				
X SUPPORT (Candidate or Measure)		TION DATE			
OPPOSE (Candidate or Measure)			Month	Day	Year
ASSIST (Office header)	Measure	DESCRIPTION			
(Officeholder)					
15 CONTRIBUTION TOTALS		L ITRIBUTIONS OF \$50 OR LESS (OTHER THA EES OF LOANS, OR CONTRIBUTIONS MADE ILESS ITEMIZED		\$	\$0.00
	2. TOTAL POLITICAL C	CONTRIBUTIONS			
	(OTHER THAN PLEDGE	ES, LOANS, OR GUARANTEES OF LOANS)		\$	\$0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED PO	DLITICAL EXPENDITURES		\$	\$0.00
	4. TOTAL POLITICAL E	XPENDITURES		\$	\$1,772.67
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CON REPORTING PERIOD	ITRIBUTIONS MAINTAINED AS OF THE LAST	DAY OF THE	\$	\$474,400.88
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMO DAY OF THE REPORTII	DUNT OF ALL OUTSTANDING LOANS AS OF NG PERIOD	THE LAST	\$	\$0.00
16 AFFIDAVIT		I swear, or affirm, under penalty of per and correct and includes all information Title 15, Election Code.			
		Cabe	ll Hobbs		
AFFIX NOTARY	STAMP / SEAL ABOVE	Signature of Ca	ımpaign Treasur	er	
Sworn to and subscribed	before me, by the said	,·	this the		day
of	, 20, to certify whic	h, witness my hand and seal of office.			
Signature of officer ad	ministering oath Prir	nted name of officer administering oath	Title of office	er administer	ing oath

### **SUBTOTALS - SPAC**

# FORM SPAC COVER SHEET PG 3

			3 of 5		
17 COMMIT Texans	TEE NAME for Ted Cruz	<b>18</b> Filer ID 00065292	(Ethics Commission Filers)		
19 SCHEDU NAME O	SUBTOTAL AMOUNT				
1.	\$				
2.	\$				
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS				
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	PR	\$		
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$		
6.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	ORGANIZATION	\$		
7.	SCHEDULE E: LOANS		\$		
8. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	<b>\$</b> 1,772.67		
9.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
10.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$		
11.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
12.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (	OF C/OH	\$		
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$		
14.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$		

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Transportation Equipment & Related Expense Travel in District Travel Out of District

Solicitation/Fundraising Expense

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/2 Rpt: 4/5 Texans for Ted Cruz 00065292 4 Date Payee name 04/24/2025 Atchley & Associates, LLP 6 Amount (\$) Payee address; City; State; Zip Code \$902.67 1005 La Posada Dr Austin, TX 78752 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Tax Preparation Services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/24/2025 RightSide Compliance LLC Amount (\$) Payee address; City; State; Zip Code \$510.00 PO Box 341027 Austin, TX 78734 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Compliance Consulting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/05/2025 RightSide Compliance LLC Amount (\$) Payee address: City: State; Zip Code \$210.00 PO Box 341027 Austin, TX 78734 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Consulting Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Compliance Consulting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
	Sch: 2/2 Rpt: 5/5	Texans for Ted Cruz		00065292		
4	Date	5 Payee name		<b>'</b>		
	03/05/2025	RightSide Compliance LLC				
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode			
	\$30.00	PO Box 341027				
		Austin, TX 78734				
٦	DUDDOCE		(1-) -			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	( <b>0)</b> D	Description  Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Consulting Expense	l ⊨	Check if Austin, TX, officeholder living expense		
				Compliance Consulting		
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held		
	expenditure to benefit C/OI	1				
F	Date	Payee name				
	04/04/2025	RightSide Compliance LLC				
⊢	Amount (\$)	Payee address; City; State; Zip Co	nde			
	\$120.00	PO Box 341027	, uc			
	<b>4120.00</b>	1 0 20% 0 12021				
		Austin, TX 78734				
L	5,155,055		<i>a</i> >			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	( <b>0)</b> D	Description  Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Consulting Expense	l ⊨	Check if Austin, TX, officeholder living expense		
				Compliance Consulting		
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held		
	expenditure to benefit C/OI	1				
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