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) 00088252 3 COMMITTEE NAME **OFFICE USE ONLY** Texans United for a Conservative Majority PAC Date Received **ELECTRONICALLY FILED** 10/27/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 121038 Date Hand-delivered or Date Postmarked Change of Address Fort Worth, TX 76121 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Justin NAME NICKNAME LAST **SUFFIX** Maloney STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 451 Meadow Pl. Drive STREET **ADDRESS** (Residence or Business) Willow Park, TX 76087 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 121038 MAILING **ADDRESS** Fort Worth, TX 76121 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (682) 267-8457 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 09/26/2025 10/25/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/04/2025 χ General Special

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

| 12 COMMITTEE NAME | | | 13 Filer ID | (Ethics Commission Filers) |
|---|--|--|--------------|----------------------------|
| Texans United for a Cor | nservative Majority PA | c | 0008825 | 2 |
| 14 COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Leigh Wambsganss State Sen | ator | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported | | |
| | | B. Opposed | | |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | |
| 15 CONTRIBUTION TOTALS | PLEDGES, LOANS, CONTRIBUTIONS M | D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold | \$ | 0.00 |
| | 2. TOTAL POLITICA (OTHER THAN PLE | L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 7,075.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED | POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICA | L EXPENDITURES | \$ | 534,726.90 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL (OF THE REPORTIN | CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD | DAY \$ | 676,913.47 |
| OUTSTANDING LOAN TOTALS | | AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD | THE \$ | 0.00 |
| 16 AFFIDAVIT | | | | |
| | | I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code. | | |
| | | Justin I | Maloney | |
| | | Signature of Car | mpaign Treas | surer |
| AFFIX NOTARY | STAMP / SEAL ABOVE | | | |
| Sworn to and subscribed | before me, by the said | , th | nis the | day |
| of | , 20, to certify v | which, witness my hand and seal of office. | | |
| Signature of officer adr | ninistering oath | Printed name of officer administering oath | Title of of | ficer administering oath |

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

Page 3 of 9

| | | | | | 1 ago 0 01 0 |
|---|---|--------------|---------------------------------|-------------|----------------------------|
| 12 COMMITTEE NAME | | | | 13 Filer ID | (Ethics Commission Filers) |
| Texans United for a Cor | nservative Majority P | AC | | 00088252 | |
| 14 COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported | | | |
| (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.) | | Dan Patrick Lieutenant Governo | or | |
| COMMITTEE | 1. Candidates | A. Supported | | | |
| ACTIVITY | (Identify by name or, if applicable, classify by party.) | | | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| | | | | | |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported | | | |
| | | B. Opposed | | | |
| | 3. Officeholders Assisted | | Alan Schoolcraft State Represe | ntative | |
| | (Identify by name or, if applicable, classify by party.) | | | | |
| COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported | | | |
| (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.) | | David Lowe State Representation | ve | |
| | | | | | |

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

| | | | | 4 of 9 |
|-----|--|--|-----------------------------|----------------------------|
| | | EE NAME nited for a Conservative Majority PAC | 18 Filer ID 00088252 | (Ethics Commission Filers) |
| | | SUBTOTALS SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | X | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ 7,075.00 |
| 2. | | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ |
| 3. | | SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ |
| 4. | | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION | PR | \$ |
| 5. | | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION | ATION OR | \$ |
| 6. | | SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA | ANIZATION | \$ |
| 7. | | SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | | \$ |
| 8. | | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C | ORGANIZATION | \$ |
| 9. | | SCHEDULE E: LOANS | | \$ |
| 10. | X | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | S | \$ 534,726.90 |
| 11. | 11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | | \$ |
| 12. | | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION | ONS | \$ |
| 13. | | | \$ | |
| 14. | | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | ONS | \$ |
| 15. | | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER | RETURNED | \$ |
| | | | | - |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUI | _E A1 |
|---|----------------------------|--|---|----------------|---|--------------|
| | The Instru | ction Guide explains how to complete this | form. | 1 | Total pages Schedule A1: Sch: 1/1 Rpt: 5/9 | |
| 2 | FILER NAME Texans Unite | ed for a Conservative Majority PAC | | 3 | Filer ID (Ethics Commission 00088252 | on Filers) |
| 4 | Date 10/12/2025 | 5 Full name of contributor out-of-state PAC (ID#: Archibald, Penny 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$25.00 |
| 8 | Principal occu | Lampasas, TX 76550 pation / Job title (See Instructions) | 9 Employer (See Instructions Retired | <u> </u> S) | | |
| | Date 10/24/2025 | Full name of contributor out-of-state PAC (ID#: Gravely, Marc Contributor address; City; State; Zip Code San Antonio, TX 78249 | | | Amount of Contribution (\$) | \$7,000.00 |
| | Principal occu Attorney | pation / Job title (See Instructions) | Employer (See Instructions Gravely Attorneys & Co | | selors | |
| | Date 10/12/2025 | Full name of contributor out-of-state PAC (ID#: Ledbetter, Roy Contributor address; City; State; Zip Code Lake Jackson, TX 77566 | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) | Employer (See Instructions Marquis Construction | <u>I</u> S) | | |
| | | | | | | |

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
Credit Card Payment

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

Printing Expense Salaries/Wages/Contract Labor

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

| Credit Card i dyment | The Instruction Guide explains how to co | mplete this form. |
|---|---|--|
| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
| Sch: 1/4 Rpt: 6/9 | Texans United for a Conservative Majority PAC | 00088252 |
| 4 Date | 5 Payee name | L |
| 10/17/2025 | Alan Schoolcraft Campaign | |
| 6 Amount (\$) \$500.00 | 7 Payee address; City; State; Zip Co 8647 FM 725 | de |
| Expenditure from corporate funds | McQueeny, TX 87123 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution |
| Complete <u>ONLY</u> if direct expenditure to benefit C/Oh | Candidate/Officeholder name Office sou | ght Office held |
| Date | Payee name | |
| 10/03/2025 | Armada Strategies | |
| Amount (\$) | Payee address; City; State; Zip Co | de |
| \$25,000.00 | 3742 N Federal Hwy | |
| | 1032 | |
| Expenditure from corporate funds | Lighthouse Point, FL 33064 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense TV Streaming in SD 9 for Leigh Wambsganss |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sou | ght Office held |
| Date | Payee name | |
| 10/16/2025 | Armada Strategies | |
| Amount (\$) \$70,000.00 Expenditure from corporate funds | Payee address; City; State; Zip Co 3742 N Federal Hwy 1032 Lighthouse Point, FL 33064 | de |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) Description |
| OF EXPENDITURE | Advertising Expense | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense TV Streaming in SD 9 for Leigh Wambsganss |
| Complete ONLY if direct expenditure to benefit C/OF | Candidate/Officeholder name Office sou | ght Office held |
| | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

| | Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | nmittee | Food/Beverage Ex Gift/Awards/Memor Legal Services The Instruction | | | Expens Wages | se s/Contract Labor | | Travel in District Travel Out of Dis OTHER (enter a | strict category not listed above) | |
|----------|---|----------|----------------|--|------------------------|------------|------------------|------------------------|--------------|---|--------------------------------------|--------|
| 1 | Total pages Schedule F1: | 2 | EII ED NIAME | | | | | | 3 | Filer ID | (Ethics Commission F | ilers) |
| | Sch: 2/4 Rpt: 7/9 | ı | | | servative Majo | rity PA | С | | 3 | 00088252 | (Luiics Commission) | 11013) |
| 4 | Date | 5 | Payee name | | | | | | | | | |
| | 10/16/2025 | ı | Dan Patrick | Campaign | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee addre | ss; City; | State; | Zip C | ode | | | | | |
| | \$350,000.00 | l | 4120 Bellaiı | | | · | | | | | | |
| | Expenditure from corporate funds | | Houston, T | < 77025 | | | | | | | | |
| 8 | PURPOSE | (a) | Category (Se | ee Categories listed | at the top of this sch | edule) | (b) | Description | | | | |
| l | OF EXPENDITURE | | Contribution | s/Donations | Made By | | | | | | plete Schedule T. | |
| l | EXI ENDITORE | | Candidate/0 | Officeholder/F | Political Comm | ittee | | \Box | | officeholder living | g expense | |
| | | | | | | | | Campaign Co | זוווכ | ibution | | |
| 9 | Complete ONII V if direct | <u> </u> | `andideta/Off | oobolde: :==: | | Office ac- | | | | Office | ald | |
| 9 | Complete ONLY if direct expenditure to benefit C/Oh | | andidate/Oπi | ceholder name | | Office sou | ugnt | | | Office he | eia | |
| | Date | | Payee name | | | | | | | | | |
| | 10/14/2025 | | David Lowe | Campaign | | | | | | | | |
| | Amount (\$) | | Payee addre | ss; City; | State; | Zip C | ode | | | | | |
| | \$10,000.00 | | 7424 Park F | Place Dr | | | | | | | | |
| | | | | | | | | | | | | |
| | Expenditure from corporate funds | | North Richla | and Hillds, TX | 76182 | | | | | | | |
| | PURPOSE | (a) | Category (Se | ee Categories listed | at the top of this sch | edule) | (b) | Description | | | | |
| | OF EXPENDITURE | | | s/Donations | | • | | | | | plete Schedule T. | |
| | | | Candidate/0 | Officeholder/F | Political Comm | ittee | | Campaign Co | | officeholder living | g expense | |
| | | | | | | | | Campaign Co | ווווו | ibution | | |
| | Complete ONLY if direct expenditure to benefit C/Oh | | Candidate/Offi | ceholder name | C | Office sou | <u>l</u> ught | | | Office he | eld | |
| F | Date | | Payee name | | | | | | | | | |
| | 10/24/2025 | | • | aks Country (| Club | | | | | | | |
| \vdash | Amount (\$) | _ | Payee addre | | | Zip C | ode | | | | | |
| | \$2,234.90 | l | | ond Oaks Dr I | | , | 200 | | | | | |
| | +=,== | | | | | | | | | | | |
| | Expenditure from corporate funds | | Fort Worth, | TX 76117 | | | | | | | | |
| | PURPOSE | (a) | Category (Se | ee Categories listed | at the top of this sch | edule) | (b) | Description | | | | |
| | OF EXPENDITURE | | Event Expe | nse | | | | | | | plete Schedule T. | |
| | | | | | | | | SD 9 Event for | | officeholder living | | |
| | | | | | | | | OD 3 EVEIILIC | <i>)</i> L | .c.gii vvaiib | ogainio | |
| \vdash | Complete ONLY if direct | Щ | `andidate/Offi | ceholder name | | Office sou | uaht | | | Office he | əld | |
| | expenditure to benefit C/O | | anduuc/OIII | contract flame | | ,,,,oc 301 | agrit | | | Onice III | J. G. | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
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POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense 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

| Candidate/Officeholder/Politica Credit Card Payment | al 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 | s) |
| Sch: 3/4 Rpt: 8/9 | Texans United for a Conservative Majority PAC 00088252 | |
| 4 Date | 5 Payee name | |
| 10/10/2025 | Leigh Wambsganns Campaign | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| \$50,000.00 | PO Box 94017 | |
| | | |
| Expenditure from corporate funds | Southlake, TX 76092 | |
| 8 PURPOSE | | |
| OF | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made Ry Check if travel outside of Texas. Complete Schedule T. | |
| 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 | |
| | | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| expenditure to benefit C/O | | |
| | <u> </u> | |
| Date | Payee name | |
| 10/16/2025 | Stratus Intelligence LLC | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$11,600.00 | 3745 Medina Rd. | |
| | STE C | |
| Expenditure from corporate funds | Medina, OH 44256 | |
| PURPOSE | | |
| OF | (a) Category (See Categories listed at the top of this schedule) Polling Expense (b) Description Check if travel outside of Texas. Complete Schedule T. | |
| EXPENDITURE | Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |
| | Voter Research | |
| | | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held | |
| expenditure to benefit C/O | | |
| | | |
| Date | Payee name | |
| 10/21/2025 | Tele-Town Hall | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$15,272.00 | 3033 Wilson Blvd | |
| | #700 | |
| Expenditure from corporate funds | Arlington, VA 22201 | |
| | | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxes, Complete Schedule T | |
| EXPENDITURE | Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |
| | Voter Outreach with Leigh Wambsganss | |
| | | |
| Complete <u>ONLY</u> if direct | Candidate/Officeholder name Office sought Office held | |
| expenditure to benefit C/O | | |
| | | |
| | | |
| | | |

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

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

| Food/Beverage Expense Polling Expense Travel in District Food/Beverage Expense Polling Expense Travel in District Fravel in District Travel Out of District Fravel Out of District Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|--|
| 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Texans United for a Conservative Majority PAC 00088252 |
| 5 Payee name |
| Texas Bank |
| 7 Payee address; City; State; Zip Code |
| 901 Santa Fe Dr. |
| Weatherford, TX 76086 |
| (a) Category (See Categories listed at the top of this schedule) (b) Description |
| Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| W/T Fees |
| |
| Candidate/Officeholder name Office sought Office held H |
| |
| |