CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

ORIGINAL PERIOD COVERED Month Day Year 06/26/2025 THROUGH EXPLANATION OF CORRECTION DTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF THE REPORTING PERIOD was reported as \$70.00 and after double of the period of the p	n day after campaign treasurer resignation solution report er (specify) August 5 Month Day Year Date Imaged DAY
TREASURER NAME ORIGINAL REPORT TYPE ORIGINAL PERIOD COVERED ORIGINAL	Date Hand-delivered or Date Postmarked and form day after campaign treasurer resignation solution report er (specify) August 5 Month Day Year Date Imaged DAY e checking that amount is correct. Date Imaged
ORIGINAL REPORT TYPE ORIGINAL REPORT TYPE July 15 Sth day before election ORIGINAL PERIOD Month Day Year 06/26/2025 THROUGH EXPLANATION OF CORRECTION OTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF THE REPORTING PERIOD was reported as \$70.00 and after double of the period of th	roff In day after campaign treasurer resignation solution report er (specify) August 5 Month Day Year 07/25/2025 DAY In checking that amount is correct. Date Imaged Date
REPORT TYPE July 15	roff In day after campaign treasurer resignation solution report er (specify) August 5 Month Day Year 07/25/2025 DAY In checking that amount is correct. Date Imaged Date
AFFIDAVIT July 15	Amount Receipt # Amount
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AFFIDAVIT AFFIDAVIT AFFIDAVIT I sv and	vear, or affirm, under penalty of perjury, that this corrected report is true d correct. eck the box next to any and all applicable statements: Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to
AFFIDAVIT I sv and Chi	vear, or affirm, under penalty of perjury, that this corrected report is true discorrect. eck the box next to any and all applicable statements: Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to
AFFIDAVIT I sv and	vear, or affirm, under penalty of perjury, that this corrected report is true discorrect. eck the box next to any and all applicable statements: Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to
Che	eck the box next to any and all applicable statements: Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to
X	was made in good faith and without an intent to mislead or to
X	
	Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.
	Mrs. Laura Hart
	Signature of Campaign Treasurer
AFFIX NOTARY STAMP / SEAL ABOVE	
Sworn to and subscribed before me, by the said	
of, 20, to certify which, witness my	hand and seal of office.
Signature of officer administering oath Printed name of c	

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00089748 3 COMMITTEE NAME **OFFICE USE ONLY** West Texas Conservatives PAC Date Received **ELECTRONICALLY FILED** 10/29/2025 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** PO Box 461 Hart, TX 79043 Date Hand-delivered or Date Postmarked CAMPAIGN MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount Mrs. Laura NAME Date Processed **NICKNAME** LAST **SUFFIX** Date Imaged Hart CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 2451 County Road 521 STREET **ADDRESS** (Residence or Business) Hart, TX 79043 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** PO Box 461 MAILING **ADDRESS** Hart, TX 79043 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (806) 647-5911 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 X August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 06/26/2025 07/25/2025

GO TO PAGE 2

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

			-	
2 COMMITTEE NAME			13 File	
West Texas Conserv	atives PAC		000	089748
4 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 Managuras	A. Supported		
	Measures (Describe by date and location)	A. Supported		
	of election and nature of issue.)			
		B. Opposed		
	Officeholders Assisted			
	(Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS (OT		
TOTALS	CONTRIBUTIONS N	OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY)		\$ 0.00
	2. TOTAL POLITICA	qualifies for the higher itemization threshold L CONTRIBUTIONS	DIO	
		DGES, LOANS, OR GUARANTEES	OF LOANS)	\$ 1,321.84
EXPENDITURE	3. TOTAL UNITEMIZE	POLITICAL EXPENDITURES		\$ 0.00
TOTALS				0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS G PERIOD	OF THE LAST DAY	\$ 1,391.84
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING L REPORTING PERIOD	OANS AS OF THE	\$ 0.00
6 AFFIDAVIT				1
		I swear, or affirm, und true and correct and ir under Title 15, Electio	ncludes all information	nat the accompanying report is required to be reported by me
			Mrs. Laura Ha	art
			Signature of Campaign	
AFFIX NOTA	RY STAMP / SEAL ABOVE			
7 11 17 17 17 17 11	(1 0 1 / 11 m / 3 L / 12 3 V L			
				day
of	, 20, to certify	which, witness my hand and seal of c	office.	
Signature of officer	administering oath	Printed name of officer administering	g oath Title	e of officer administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

			4 of 7
17 COMMITTE West Texa	EE NAME as Conservatives PAC	18 Filer ID 00089748	(Ethics Commission Filers)
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 1,220.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 101.84
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$
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	\$
			•

	MONEI	ARY POLITICAL CONTRIL	BUTIC	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to comple	te this f	orm.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 5/7	
2	FILER NAME West Texas	Conservatives PAC			3	Filer ID (Ethics Commission 00089748	n Filers)
4	Date 07/01/2025	 Full name of contributor out-of-state Harris, David & Jessica Contributor address; City; State; Zip Code 	PAC (ID#:_		7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Lubbock, TX 79413 pation / Job title (See Instructions)		9 Employer (See Instructions	<u> </u>		
	Date 07/11/2025	Full name of contributor out-of-state Hinsley, Ann Contributor address; City; State; Zip Code Wolfforth, TX 79382	PAC (ID#:_			Amount of Contribution (\$)	\$10.00
		pation / Job title (See Instructions) Building Manager		Employer (See Instructions	5)		
	Date 07/18/2025	Full name of contributor out-of-state Hinsley, Ann Contributor address; City; State; Zip Code	PAC (ID#:_			Amount of Contribution (\$)	\$100.00
		Wolfforth, TX 79382					
		pation / Job title (See Instructions) Building Manager		Employer (See Instructions	5)		
	Date 07/25/2025	Full name of contributor out-of-state Hinsley, Ann Contributor address; City; State; Zip Code Wolfforth, TX 79382	PAC (ID#:_			Amount of Contribution (\$)	\$50.00
		oation / Job title (See Instructions) Building Manager		Employer (See Instructions	5)		
	Date 07/11/2025	Full name of contributor out-of-state Sweeten, Pamela (Ms.) Contributor address; City; State; Zip Code Lubbock, TX 79416	PAC (ID#:_			Amount of Contribution (\$)	\$10.00
	Principal occu Self	oation / Job title (See Instructions)		Employer (See Instructions Self	<u> </u>		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 2/2 Rpt: 6/7
2	FILER NAME West Texas	Conservatives PAC		3	Filer ID (Ethics Commission Filers) 00089748
4	Date 06/30/2025	 Full name of contributor)	7	Amount of Contribution (\$) \$1,000.00
		Hart, TX 79043	1		
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)	

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 7/7 2 FILER NAME 3 Filer ID (Ethics Commission Filers) West Texas Conservatives PAC 00089748 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 6 Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 07/11/2025 Vic & Laura Hart Farms, LLC \$101.84 Paid Tech Checks, Inc. for 7 Contributor address; City; State; Zip Code the West Texas Conservatives, PAC new banking account at Hart, TX 79043 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)