

**GENERAL-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM GPAC
COVER SHEET PG 1**

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00089809	2 Total pages filed: 7			
3 COMMITTEE NAME Heart of Texas Conservatives PAC		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2026 Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged				
4 COMMITTEE ADDRESS #1022 Bastrop, TX 78602						
<input type="checkbox"/> Change of Address						
5 CAMPAIGN TREASURER NAME Jacob						
NICKNAME LAST Lee						
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 720 State Highway 71W #1022 Bastrop, TX 78602			APT / SUITE #;	CITY;	STATE;
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; 720 State Highway 71W #1022 Bastrop, TX 78602	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
<input type="checkbox"/> Change of Address						
8 CAMPAIGN TREASURER PHONE	AREA CODE (832) 851-3182	PHONE NUMBER	EXTENSION			
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff					
10 PERIOD COVERED	Month 10/10/2025	Day	Year	Month 12/31/2025	Day	Year
11 ELECTION Month 03/03/2026		ELECTION DATE Day	Primary General	ELECTION TYPE Runoff Special	Other	

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**GENERAL-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Heart of Texas Conservatives PAC		13 FILER ID (Ethics Commission Filers) 00089809
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed Chip Roy Attorney General
	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	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 85,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 83,135.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,115.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 250.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Jacob Lee

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 7

17 COMMITTEE NAME Heart of Texas Conservatives PAC	18 FILER ID (Ethics Commission Filers) 00089809
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 85,000.00	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS \$	
4. <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
6. <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
7. <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION \$	
8. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$	
9. <input checked="" type="checkbox"/> SCHEDULE E: LOANS \$ 250.00	
10. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 83,135.00	
11. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$	
12. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$	
13. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$	
14. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$	
15. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/7</p>
<p>2 FILER NAME Heart of Texas Conservatives PAC</p>		<p>3 Filer ID (Ethics Commission Filers) 00089809</p>
<p>4 Date 12/13/2025</p>	<p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, David 6 Contributor address; City; State; Zip Code Galveston, TX 77550</p>	<p>7 Amount of Contribution (\$) \$25,000.00</p>
<p>8 Principal occupation / Job title (See Instructions) Owner</p>		<p>9 Employer (See Instructions) Owner</p>
<p>Date 11/20/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, David Contributor address; City; State; Zip Code Galveston, TX 77550</p>	<p>Amount of Contribution (\$) \$25,000.00</p>
<p>Principal occupation / Job title (See Instructions) Owner</p>		<p>Employer (See Instructions) Owner</p>
<p>Date 12/02/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, David Contributor address; City; State; Zip Code Galveston, TX 77550</p>	<p>Amount of Contribution (\$) \$35,000.00</p>
<p>Principal occupation / Job title (See Instructions) Owner</p>		<p>Employer (See Instructions) Owner</p>

LOANS

SCHEDULE E

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule E: Sch: 1/1 Rpt: 5/7</p>
<p>2 FILER NAME Heart of Texas Conservatives PAC</p>		<p>3 Filer ID (Ethics Commission Filers) 00089809</p>
<p>4 TOTAL OF UNITEMIZED LOANS</p>		\$
<p>5 Date of loan 11/13/2025</p>	<p>7 Name of lender Lee, Jacob</p> <p><input type="checkbox"/> out-of-state PAC (ID#:</p>	<p>9 Loan Amount (\$) \$250.00</p>
<p>6 Is lender a financial institution? No</p>	<p>8 Lender address; City; State; Zip Code Richmond, TX 77469</p>	<p>10 Interest Rate</p> <p>11 Maturity Date</p>
<p>12 Principal occupation / Job title (See Instructions) Owner</p>		<p>13 Employer (See Instructions) Owner</p>
<p>14 Description of Collateral <input checked="" type="checkbox"/> None</p>		<p>15 Check if personal funds were deposited into political account <input type="checkbox"/> N/A (See Instructions)</p>
<p>16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable</p>	<p>17 Name of guarantor</p> <p>18 Guarantor address; City; State; Zip Code</p>	<p>19 Amount Guaranteed (\$)</p>
<p>20 Principal occupation</p>		<p>21 Employer (See Instructions)</p>

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 1/2 Rpt: 6/7	2 FILER NAME Heart of Texas Conservatives PAC	3 Filer ID (Ethics Commission Filers) 00089809
4 Date 11/13/2025	5 Payee name B1 Bank	
6 Amount (\$) \$20.00	7 Payee address; City; 1800 E Nasa PKwy Houston, TX 77058	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 11/20/2025	Payee name B1 Bank	
Amount (\$) \$20.00	Payee address; City; 1800 E Nasa PKwy Houston, TX 77058	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/02/2025	Payee name B1 Bank	
Amount (\$) \$20.00	Payee address; City; 1800 E Nasa PKwy Houston, TX 77058	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 2/2 Rpt: 7/7	2 FILER NAME Heart of Texas Conservatives PAC	3 Filer ID (Ethics Commission Filers) 00089809
4 Date 11/17/2025	5 Payee name Harris Media, LLC	
6 Amount (\$) \$24,025.00	7 Payee address; City; State; Zip Code 66 W Flagler St Unit PH-1 Miami, FL 33130	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad's
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Harris Media, LLC	Office sought Office held
Date 11/24/2025	Payee name Harris Media, LLC	
Amount (\$) \$24,025.00	Payee address; City; State; Zip Code 66 W Flagler St Unit PH-1 Miami, FL 33130	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Harris Media, LLC	Office sought Office held
Date 12/04/2025	Payee name Harris Media, LLC	
Amount (\$) \$35,025.00	Payee address; City; State; Zip Code 66 W Flagler St Unit PH-1 Miami, FL 33130	
<input type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Harris Media, LLC	Office sought Office held