

**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) 00088960	2 Total pages filed: 8			
3 COMMITTEE NAME Texas Senate Leadership Fund		OFFICE USE ONLY <p>Date Received ELECTRONICALLY FILED 01/15/2026</p> <p>Date Hand-delivered or Date Postmarked</p> <p>Receipt # <input type="text"/> Amount <input type="text"/></p> <p>Date Processed</p> <p>Date Imaged</p>				
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address 1 E Greenway Plaza Ste 225 Houston, TX 77046						
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ryan			MI		
	NICKNAME Patrick	LAST SUFFIX				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 1 E. Greenway Plaza Ste. 225 Houston, TX 77046	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; 1 E. Greenway Plaza Ste. 225 Houston, TX 77046	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	AREA CODE (713) 526-3399	PHONE NUMBER	EXTENSION			
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15	<input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff	<input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination			
10 PERIOD COVERED	Month 10/26/2025	Day	Year	Month 12/31/2025	Day	Year
11 ELECTION	ELECTION DATE Month Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> General	ELECTION TYPE <input type="checkbox"/> Runoff <input type="checkbox"/> Special	<input type="checkbox"/> Other		

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

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Texas Senate Leadership Fund		13 FILER ID (Ethics Commission Filers) 00088960
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
	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 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)	\$ 505,250.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 449,384.40
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 80,106.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
16 AFFIDAVIT		
<p>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.</p> <p>Ryan Patrick _____ Signature of Campaign Treasurer</p>		
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
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17 COMMITTEE NAME Texas Senate Leadership Fund	18 FILER ID (Ethics Commission Filers) 00088960
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 505,250.00	
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 type="checkbox"/> SCHEDULE E: LOANS \$	
10. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 449,384.40	
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: 4/8</p>
<p>2 FILER NAME Texas Senate Leadership Fund</p>		<p>3 Filer ID (Ethics Commission Filers) 00088960</p>
<p>4 Date 12/01/2025</p>	<p>5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00076810</u>) General Motors Company PAC</p>	<p>7 Amount of Contribution (\$) \$5,000.00</p>
	<p>6 Contributor address; City; State; Zip Code Washington, DC 20001</p>	
<p>8 Principal occupation / Job title (See Instructions) Retired</p>		<p>9 Employer (See Instructions) Retired</p>
<p>Date 11/14/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanson, Mark</p>	<p>Amount of Contribution (\$) \$250.00</p>
	<p>Contributor address; City; State; Zip Code Arlington, TX 76012</p>	
<p>Principal occupation / Job title (See Instructions) Retired</p>		<p>Employer (See Instructions) Retired</p>
<p>Date 10/29/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans For Dan Patrick</p>	<p>Amount of Contribution (\$) \$250,000.00</p>
	<p>Contributor address; City; State; Zip Code Houston, TX 77046</p>	
<p>Principal occupation / Job title (See Instructions)</p>		<p>Employer (See Instructions)</p>
<p>Date 10/30/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans For Dan Patrick</p>	<p>Amount of Contribution (\$) \$250,000.00</p>
	<p>Contributor address; City; State; Zip Code Houston, TX 77046</p>	
<p>Principal occupation / Job title (See Instructions)</p>		<p>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: 1/4 Rpt: 5/8	2 FILER NAME Texas Senate Leadership Fund	3 Filer ID (Ethics Commission Filers) 00088960
4 Date 10/27/2025	5 Payee name AdCrunch	
6 Amount (\$) \$67,063.04	7 Payee address; City; State; Zip Code 990 Spectrum Dr Austin, TX 78717	
<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 Campaign Interest Display Advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/31/2025	Payee name AdCrunch	
Amount (\$) \$106,770.30	Payee address; City; State; Zip Code 990 Spectrum Dr Austin, TX 78717	
<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 Campaign Internet Display Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/27/2025	Payee name Advantage	
Amount (\$) \$20,082.40	Payee address; City; State; Zip Code 9420 Bonita Beach Rd SE Ste 200 Bonita Springs, FL 34135	
<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 Campaign Phone Bank
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

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: 2/4 Rpt: 6/8	2 FILER NAME Texas Senate Leadership Fund	3 Filer ID (Ethics Commission Filers) 00088960
4 Date 11/04/2025	5 Payee name Advantage	
6 Amount (\$) \$30,483.44	7 Payee address; City; State; Zip Code 9420 Bonita Beach Rd SE Ste 200 <input type="checkbox"/> Expenditure from corporate funds Bonita Springs, FL 34135	
8 PURPOSE OF EXPENDITURE	(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 Campaign Phone Bank
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/05/2025	Payee name Advantage	
Amount (\$) \$27,078.48	Payee address; City; State; Zip Code 9420 Bonita Beach Rd SE Ste 200 <input type="checkbox"/> Expenditure from corporate funds Bonita Springs, FL 34135	
PURPOSE OF EXPENDITURE	(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 Campaign Phone Bank
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/27/2025	Payee name Baselice and Associates	
Amount (\$) \$24,181.00	Payee address; City; State; Zip Code PO Box 50238 <input type="checkbox"/> Expenditure from corporate funds Austin, TX 78763	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 Campaign Polling
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

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: 3/4 Rpt: 7/8	2 FILER NAME Texas Senate Leadership Fund	3 Filer ID (Ethics Commission Filers) 00088960
4 Date 11/05/2025	5 Payee name Case Hall and Company	
6 Amount (\$) \$26,485.74	7 Payee address; City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046	
<input type="checkbox"/> Expenditure from corporate funds	<p>8 PURPOSE OF EXPENDITURE</p> <p>(a) Category (See Categories listed at the top of this schedule) Advertising Expense</p> <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Text Messaging</p>	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Leigh Wambsganss Campaign	Office sought Office held
Date 10/29/2025	Payee name Leigh Wambsganss Campaign	
Amount (\$) \$100,000.00	Payee address; City; State; Zip Code PO Box 84017 Southlake, TX 76092	
<input type="checkbox"/> Expenditure from corporate funds	<p>PURPOSE OF EXPENDITURE</p> <p>(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee</p> <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution</p>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Vanguard Field Strategies	Office sought Office held
Date 10/27/2025	Payee name Vanguard Field Strategies	
Amount (\$) \$29,240.00	Payee address; City; State; Zip Code 800 W 47th St Ste 200 Kansas City, MO 64112	
<input type="checkbox"/> Expenditure from corporate funds	<p>PURPOSE OF EXPENDITURE</p> <p>(a) Category (See Categories listed at the top of this schedule) Advertising Expense</p> <p>(b) Description</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Walk Program</p>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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: 4/4 Rpt: 8/8	2 FILER NAME Texas Senate Leadership Fund	3 Filer ID (Ethics Commission Filers) 00088960	
4 Date 11/13/2025	5 Payee name Weeks and Co.		
6 Amount (\$) \$18,000.00	7 Payee address; City; State; Zip Code 5701 W Slaughter Ln Ste A-130-500 Austin, TX 78749		
8 PURPOSE OF EXPENDITURE	(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 Campaign Production Fees	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held