

# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC  
COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00087902	2 Total pages filed: 8	
3 COMMITTEE NAME Texans for Opportunity			OFFICE USE ONLY	
			Date Received ELECTRONICALLY FILED 01/15/2026	
			Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
4 COMMITTEE ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 304 West 13th Street  Austin, TX 78701			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Shannon			
	NICKNAME LAST SUFFIX Rusing			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 304 West 13th Street  Austin, TX 78701			
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 304 West 13th Street  Austin, TX 78701			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 217-3303			
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination			
10 PERIOD COVERED	Month Day Year 10/26/2025 THROUGH Month Day Year 12/31/2025			
11 ELECTION	ELECTION DATE Month Day Year 11/04/2025		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special Uniform Election	

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# SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **SPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Texans for Opportunity		<b>13 Filer ID</b> (Ethics Commission Filers) 00087902	
<b>14 COMMITTEE PURPOSE</b>  (Attach lists on plain paper to complete this report if necessary.)  <input checked="" type="checkbox"/> <b>SUPPORT</b> (Candidate or Measure)  <input type="checkbox"/> <b>OPPOSE</b> (Candidate or Measure)  <input type="checkbox"/> <b>ASSIST</b> (Officeholder)	<input type="checkbox"/> Candidate  <input type="checkbox"/> Officeholder	<b>CANDIDATE / OFFICEHOLDER NAME</b>	
		<b>OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)</b>	
	<input checked="" type="checkbox"/> Measure	<b>BALLOT IDENTIFICATION / #</b> Prop 4	<b>ELECTION DATE</b> Month    Day    Year 11/04/2025
		<b>DESCRIPTION</b> Allocate Portion of Sales Tax Revenue to Water Fund Amendment	
<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED</b>	\$ 0.00	
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 114,500.00	
<b>EXPENDITURE TOTALS</b>	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00	
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 182,950.00	
<b>CONTRIBUTION BALANCE</b>	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 1,393.80	
<b>OUTSTANDING LOAN TOTALS</b>	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00	

<b>16 AFFIDAVIT</b>		
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.		
AFFIX NOTARY STAMP / SEAL ABOVE		Ms. Shannon Rusing _____ Signature of Campaign Treasurer
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 - SPAC****FORM SPAC**  
**COVER SHEET PG 3**  
3 of 8

<b>17</b> COMMITTEE NAME Texans for Opportunity		<b>18</b> Filer ID (Ethics Commission Filers) 00087902
<b>19</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 114,500.00
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input checked="" type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 31,500.00
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 182,950.00
9.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
14.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 1/1 Rpt: 4/8
2 FILER NAME Texans for Opportunity		3 Filer ID (Ethics Commission Filers) 00087902
4 Date 10/29/2025	5 Corporation / Labor Organization name American Rivers	7 Amount of contribution (\$) \$5,000.00
	6 Corporation / Labor Organization address; City; State; Zip Code  Washington, DC 20005	
Date 12/30/2025	Corporation / Labor Organization name Chevron	Amount of contribution (\$) \$28,000.00
	Corporation / Labor Organization address; City; State; Zip Code  San Ramon, CA 94583	
Date 11/19/2025	Corporation / Labor Organization name ExxonMobil	Amount of contribution (\$) \$75,000.00
	Corporation / Labor Organization address; City; State; Zip Code  Spring, TX 77389	
Date 11/19/2025	Corporation / Labor Organization name Freedom Waterworks Inc.	Amount of contribution (\$) \$1,500.00
	Corporation / Labor Organization address; City; State; Zip Code  Houston, TX 77280	
Date 10/29/2025	Corporation / Labor Organization name Halff Associates, Inc.	Amount of contribution (\$) \$5,000.00
	Corporation / Labor Organization address; City; State; Zip Code  Richardson, TX 75081-2275	

# PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

## SCHEDULE D

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule D: Sch: 1/2 Rpt: 5/8	
<b>2</b> FILER NAME Texans for Opportunity		<b>3</b> Filer ID (Ethics Commission Filers) 00087902	
<b>4</b> Date 12/31/2025	<b>5</b> Corporation / Labor Organization Name Black & Veatch <hr/> <b>6</b> Corporation / Labor Organization address; City; State; Zip Code  Houston, TX 77024	<b>7</b> Amount of pledge (\$)  \$2,500.00  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<b>8</b> In-kind description (if applicable)
Date 12/31/2025	Corporation / Labor Organization Name Core & Main <hr/> Corporation / Labor Organization address; City; State; Zip Code  Pflugerville, TX 78660	<b>7</b> Amount of pledge (\$)  \$2,000.00  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind description (if applicable)
Date 12/31/2025	Corporation / Labor Organization Name EBAA Iron Inc. <hr/> Corporation / Labor Organization address; City; State; Zip Code  Eastland, TX 76448	<b>7</b> Amount of pledge (\$)  \$2,000.00  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind description (if applicable)
Date 12/31/2025	Corporation / Labor Organization Name Locke Solutions <hr/> Corporation / Labor Organization address; City; State; Zip Code  Houston, TX 77047	<b>7</b> Amount of pledge (\$)  \$1,500.00  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind description (if applicable)
Date 12/31/2025	Corporation / Labor Organization Name Mc2 Solutions <hr/> Corporation / Labor Organization address; City; State; Zip Code  Houston, TX 77039	<b>7</b> Amount of pledge (\$)  \$4,000.00  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind description (if applicable)
Date 12/31/2025	Corporation / Labor Organization Name NRG <hr/> Corporation / Labor Organization address; City; State; Zip Code  Princeton, NJ 08540	<b>7</b> Amount of pledge (\$)  \$5,000.00  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	In-kind description (if applicable)

# PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE D

The Instruction Guide explains how to complete this form.		1 Total pages Schedule D: Sch: 2/2 Rpt: 6/8	
2 FILER NAME Texans for Opportunity		3 Filer ID (Ethics Commission Filers) 00087902	
4 Date 12/31/2025	5 Corporation / Labor Organization Name North Texas Commission	7 Amount of pledge (\$) \$2,500.00	8 In-kind description (if applicable)
	6 Corporation / Labor Organization address; City; State; Zip Code  Irving, TX 75063	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Date 12/31/2025	Corporation / Labor Organization Name PLW Webber	7 Amount of pledge (\$) \$2,000.00	In-kind description (if applicable)
	Corporation / Labor Organization address; City; State; Zip Code  The Woodlands, TX 77380	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Date 12/31/2025	Corporation / Labor Organization Name Valero	7 Amount of pledge (\$) \$10,000.00	In-kind description (if applicable)
	Corporation / Labor Organization address; City; State; Zip Code  San Antonio, TX 78269	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

# 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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/2 Rpt: 7/8	<b>2</b> FILER NAME Texans for Opportunity	<b>3</b> Filer ID (Ethics Commission Filers) 00087902
<b>4</b> Date 10/30/2025	<b>5</b> Payee name AdvoText, LLC	
<b>6</b> Amount (\$) \$36,750.00	<b>7</b> Payee address; City; State; Zip Code 342 East Bay Street  Charleston, SC 29401	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting Service
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/30/2025	Candidate/Officeholder name Office sought Office held	
Payee name AdvoText, LLC		
Amount (\$) \$12,250.00	Payee address; City; State; Zip Code 342 East Bay Street  Charleston, SC 29401	
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 Texting Service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/27/2025	Candidate/Officeholder name Office sought Office held	
Payee name Drive Public Affairs		
Amount (\$) \$49,087.50	Payee address; City; State; Zip Code 342 East Bay St.  Charleston, SC 29401	
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 Online Media Buys
Complete <u>ONLY</u> if direct 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  
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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/2 Rpt: 8/8	<b>2</b> FILER NAME Texans for Opportunity	<b>3</b> Filer ID (Ethics Commission Filers) 00087902
<b>4</b> Date 10/27/2025	<b>5</b> Payee name Drive Public Affairs	
<b>6</b> Amount (\$) \$8,662.50	<b>7</b> Payee address; City; State; Zip Code 342 East Bay St.  Charleston, SC 29401	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Media Placement Fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2025	Payee name RightSide Compliance LLC	
Amount (\$) \$1,200.00	Payee address; City; State; Zip Code #134 7415 Southwest Pkwy. Bldg. 6, Ste. 500 Austin, TX 78735	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2025	Payee name Texas Oil & Gas Association	
Amount (\$) \$75,000.00	Payee address; City; State; Zip Code 304 W 13th St  Austin, TX 78701	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Refund Contribution	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refund Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held