

**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<br>(Ethics Commission Filers)<br>00089836   | 2 Total pages filed:<br>7                     |
| 3 COMMITTEE NAME<br>Justice for Texas Victims   |  | <b>OFFICE USE ONLY</b> <p>Date Received<br/>ELECTRONICALLY FILED<br/>02/02/2026</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<br><br><input type="checkbox"/> Change of Address<br>2101 Cedar Springs Road<br>Ste. 1900<br>Dallas, TX 75201 |  |  |   |
|   |  |  |   |
|   |  |  |   |
|   |  |  |   |
| 5 CAMPAIGN TREASURER NAME   | MS / MRS / MR<br>Mr.   |  |   |
|   | NICKNAME   | LAST<br>Lyons  | SUFFIX  |
| 6 CAMPAIGN TREASURER STREET ADDRESS<br>(Residence or Business)  | STREET ADDRESS (NO PO BOX PLEASE);<br>2101 Cedar Springs Road<br>Ste. 1900<br>Dallas, TX 75201   |  | APT / SUITE #;<br>CITY;<br>STATE;<br>ZIP CODE |
| 7 CAMPAIGN TREASURER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address  | STREET OR PO BOX;<br>2101 Cedar Springs Road<br>Ste. 1900<br>Dallas, TX 75201  |  |   |
| 8 CAMPAIGN TREASURER PHONE  | AREA CODE<br>(682) 350-5632  | PHONE NUMBER   | EXTENSION                                     |
| 9 REPORT TYPE   | <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)<br><input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination<br><input type="checkbox"/> Runoff |  |   |
| 10 PERIOD COVERED   | Month<br>01/01/2026  | Day  | Year  |
|   | THROUGH  |  | Month<br>01/22/2026                           |
| 11 ELECTION   | ELECTION DATE<br>Month<br>03/03/2026   | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special  |   |

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

**FORM GPAC  
COVER SHEET PG 2**

|   |  |  |
|---|--|--|
| <b>12 COMMITTEE NAME</b><br>Justice for Texas Victims   |  | <b>13 FILER ID</b> (Ethics Commission Filers)<br>00089836      |
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | 1. Candidates<br>(Identify by name or, if applicable, classify by party.)  | A. Supported David Lowe State Representative<br><br>B. Opposed |
|   | 2. Measures<br>(Describe by date and location of election and nature of issue.)  | A. Supported<br><br>B. Opposed                                 |
|   | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.)  |  |
|   |  |  |
| <b>15 CONTRIBUTION TOTALS</b>   | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)<br><input type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ 0.00  |
|   | <b>2. TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)   | \$ 0.00  |
| <b>EXPENDITURE TOTALS</b>   | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES   | \$ 0.00  |
|   | <b>4. TOTAL POLITICAL EXPENDITURES</b>   | \$ 135,000.00  |
| <b>CONTRIBUTION BALANCE</b>   | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$ 174,790.85  |
| <b>OUTSTANDING LOAN TOTALS</b>  | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  | \$ 0.00  |

**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.

Mr. Mike Lyons

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

**GENERAL-PURPOSE COMMITTEE REPORT:  
PURPOSE**

**FORM GPAC  
ADDENDUM**

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|   |   |  |
|---|---|--|
| <b>12 COMMITTEE NAME</b><br>Justice for Texas Victims   |   | <b>13 FILER ID</b> (Ethics Commission Filers)<br>00089836        |
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | 1. Candidates<br>(Identify by name or, if applicable, classify by party.)             | A. Supported Armin Mizani State Representative<br><br>B. Opposed |
|   | 2. Measures<br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed                                   |
|   | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) |  |
|   |   |  |
| <b>COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.)    | 1. Candidates<br>(Identify by name or, if applicable, classify by party.)             | A. Supported Matt Thorsen State Representative<br><br>B. Opposed |
|   | 2. Measures<br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed                                   |
|   | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) |  |
|   |   |  |
| <b>COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.)    | 1. Candidates<br>(Identify by name or, if applicable, classify by party.)             | A. Supported Andy Hopper State Representative<br><br>B. Opposed  |
|   | 2. Measures<br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed                                   |
|   | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) |  |
|   |   |  |

**GENERAL-PURPOSE COMMITTEE REPORT:  
PURPOSE****FORM GPAC  
ADDENDUM**

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|   |   |   |
|---|---|---|
| <b>12 COMMITTEE NAME</b><br>Justice for Texas Victims   |   | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00089836       |
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | 1. Candidates<br>(Identify by name or, if applicable, classify by party.)             | A. Supported Marc LaHood State Representative<br><br>B. Opposed |
|   | 2. Measures<br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed                                  |
|   | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) |   |
|   |   |   |

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

|   |  |
|---|--|
| <b>17</b> COMMITTEE NAME<br>Justice for Texas Victims   | <b>18</b> FILER ID<br>(Ethics Commission Filers)<br>00089836 |
| <b>19</b> SCHEDULE SUBTOTALS<br>NAME OF SCHEDULE  |  |
| 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 type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR<br>ORGANIZATION               |  |
| 5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR<br>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<br>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                |  |
| 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<br>TO FILER      |  |

# 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:<br>Sch: 1/2 Rpt: 6/7           | 2 FILER NAME<br>Justice for Texas Victims  | 3 Filer ID (Ethics Commission Filers)<br>00089836   |
| 4 Date<br>01/09/2026                                      | 5 Payee name<br>Andy Hopper Campaign   |   |
| 6 Amount (\$)<br>\$10,000.00                              | 7 Payee address; City;<br>1581 CR 2224<br><br>Decatur, TX 76244  |   |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Contribution to political campaign |
| 9 Complete ONLY if direct expenditure to benefit C/OH     | Candidate/Officeholder name<br>Office sought   | Office held   |
| Date<br>01/09/2026  | Payee name<br>Armin Mizani Campaign  |   |
| Amount (\$)<br>\$10,000.00                                | Payee address; City;<br>P.O. Box 678<br><br>Keller, TX 76244   |   |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Contribution to political campaign |
| Complete ONLY if direct expenditure to benefit C/OH       | Candidate/Officeholder name<br>Office sought   | Office held   |
| Date<br>01/09/2026  | Payee name<br>David Lowe Campaign  |   |
| Amount (\$)<br>\$50,000.00                                | Payee address; City;<br>9017 Cedar Breaks Drive<br><br>North Richland Hills, TX 76182  |   |
| <input type="checkbox"/> Expenditure from corporate funds | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Contribution to political campaign |
| Complete ONLY if direct expenditure to benefit C/OH       | Candidate/Officeholder name<br>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:<br>Sch: 2/2 Rpt: 7/7       | 2 FILER NAME<br>Justice for Texas Victims  | 3 Filer ID (Ethics Commission Filers)<br>00089836   |
| 4 Date<br>01/09/2026                                  | 5 Payee name<br>Marc LaHood Campaign   |   |
| 6 Amount (\$)<br>\$40,000.00                          | 7 Payee address; City;<br>127 Encino Blanco<br><br>San Antonio, TX 78232   | State; Zip Code   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Contribution to political campaign |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought   | Office held   |
| Date<br>01/14/2026                                    | Payee name<br>Matt Thorsen Campaign  |   |
| Amount (\$)<br>\$25,000.00                            | Payee address; City;<br>3218 Fannin Rd.<br>#1008<br>Melissa, TX 75454  | State; Zip Code   |
|   |  |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Contribution to political campaign |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought   | Office held   |