

DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

FORM DCE
COVER SHEET PG 1

The DCE Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090668	2 Total pages filed: 6		
3 FILER NAME	MS / MRS / MR FIRST MI <hr/> NICKNAME LAST SUFFIX First Amendment Alliance		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 02/02/2026		
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 901 N WASHINGTON ST STE 700 ALEXANDRIA, VA 22314				
4 FILER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 901 N WASHINGTON ST STE 700 ALEXANDRIA, VA 22314		Date Hand-delivered or Date Postmarked		
5 FILER PHONE	AREA CODE PHONE NUMBER EXTENSION (703) 299-8571		Receipt # Amount		
6 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff		Date Processed Date Imaged		
7 PERIOD COVERED	Month Day Year Month Day Year 01/22/2026 THROUGH 01/22/2026				
8 ELECTION	<table style="width: 100%;"> <tr> <td style="width: 40%;"> ELECTION DATE Month Day Year 03/03/2026 </td> <td style="width: 60%;"> ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special </td> </tr> </table>			ELECTION DATE Month Day Year 03/03/2026	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
ELECTION DATE Month Day Year 03/03/2026	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special				
9 FILER 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		
	(Empty space for candidates)		B. Opposed WILLIE NG State Representative		
	2. Measures (Describe by date and location of election and nature of issue.)		A. Supported		
	(Empty space for measures)		B. Opposed		
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	(Empty space for officeholders)				
GO TO PAGE 2					

DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

FORM DCE
COVER SHEET PG 2

10 FILER NAME First Amendment Alliance Educational Fund (501C4)		11 Filer ID (Ethics Commission Filers) 00090668
12 EXPENDITURE TOTALS	1. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	2. TOTAL POLITICAL EXPENDITURES	\$ 51,356.32

13 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.

Signature of Filer

or

Signature of individual with authority to sign on behalf of entity

(only if Filer is an entity)

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

DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

FORM **DCE**
ADDENDUM

Page 3 of 6

10 FILER NAME First Amendment Alliance Educational Fund (501C4)		11 Filer ID (Ethics Commission Filers) 00090668
12 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 MATT THORSEN State Representative
		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)	
	12 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (identify by name or, if applicable, classify by party)
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)		
12 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)		1. Candidates (identify by name or, if applicable, classify by party)
	B. Opposed JEFF LEACH State Representative	
	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)	

SUBTOTALS - DCE

FORM DCE
COVER SHEET PG 3
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14 FILER NAME First Amendment Alliance Educational Fund (501C4)		15 Filer ID (Ethics Commission Filers) 00090668	
16 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES	\$	51,356.32
2.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
3.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	

POLITICAL EXPENDITURES

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.

1 Total pages Schedule F1: Sch: 1/2 Rpt: 5/6	2 FILER NAME First Amendment Alliance Educational Fund (501C4)	3 Filer ID (Ethics Commission Filers) 00090668
4 Date 01/22/2026	5 Payee name THE YATES COMPANY	
6 Amount (\$) \$14,278.41	7 Payee address; City; State; Zip Code 2714 BRIAR VIEW RD PEARLAND, TX 77581	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
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. DIRECT MAIL - INCLUDES OPPOSE OF WILLIE NG (CHALLENGER)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name DORAZIO, MARK	Office sought State Representative District 122 Office held State Representative District
Date 01/22/2026	Payee name THE YATES COMPANY	
Amount (\$) \$11,399.75	Payee address; City; State; Zip Code 2714 BRIAR VIEW RD PEARLAND, TX 77581	
<input type="checkbox"/> Expenditure from corporate funds		
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. DIRECT MAIL - INCLUDES OPPOSE OF JEFF LEACH (INCUMBENT)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name THORSEN, MATT	Office sought State Representative District 67 Office held
Date 01/22/2026	Payee name THE YATES COMPANY	
Amount (\$) \$14,278.41	Payee address; City; State; Zip Code 2714 BRIAR VIEW DR PEARLAND, TX 77581	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
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. DIRECT MAIL - INCLUDES OPPOSE OF WILLIE NG (CHALLENGER)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name DORAZIO, MARK	Office sought State Representative District 122 Office held State Representative District

POLITICAL EXPENDITURES

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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Consulting Expense
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Event Expense
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Salaries/Wages/Contract Labor

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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name THORSEN, MATT	Office sought State Representative District 67 Office held