

**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			OFFICE USE ONLY
	NICKNAME LAST SUFFIX First Amendment Alliance			Date Received ELECTRONICALLY FILED 02/02/2026
4 FILER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 901 N WASHINGTON ST STE 700			Date Hand-delivered or Date Postmarked
	ALEXANDRIA, VA 22314			Date Processed
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 Imaged
7 PERIOD COVERED	Month Day Year 01/22/2026	THROUGH Month Day Year 01/22/2026		
8 ELECTION	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		
		B. Opposed WILLIE NG 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.)				

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**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)	A. Supported MARK DORAZIO 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)	A. Supported 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	
1. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES	SUBTOTAL AMOUNT \$ 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	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: 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; 2714 BRIAR VIEW RD PEARLAND, TX 77581		
<input checked="" 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. DIRECT MAIL - INCLUDES OPPOSE OF WILLIE NG (CHALLENGER)	
9 Complete ONLY 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; 2714 BRIAR VIEW RD PEARLAND, TX 77581		
<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. DIRECT MAIL - INCLUDES OPPOSE OF JEFF LEACH (INCUMBENT)	
Complete ONLY 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; 2714 BRIAR VIEW DR PEARLAND, TX 77581		
<input checked="" 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. DIRECT MAIL - INCLUDES OPPOSE OF WILLIE NG (CHALLENGER)	
Complete ONLY 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)

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)

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1 Total pages Schedule F1: Sch: 2/2 Rpt: 6/6	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 (\$) \$11,399.75	7 Payee address; City; 2714 BRIAR VIEW RD PEARLAND, TX 77581	
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 JEFF LEACH (INCUMBENT)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name THORSEN, MATT	Office sought State Representative District 67
		Office held