



# DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

FORM DCE  
COVER SHEET PG 2

<b>10 FILER NAME</b> Americans United For Values		<b>11 Filer ID</b> (Ethics Commission Filers) 00088746
<b>12 EXPENDITURE TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>2. TOTAL POLITICAL EXPENDITURES</b>	\$ 80,000.00

**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

# SUBTOTALS - DCE

FORM DCE  
COVER SHEET PG 3  
3 of 4

<b>14 FILER NAME</b> Americans United For Values		<b>15 Filer ID</b> (Ethics Commission Filers) 00088746
<b>16 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES	\$ 80,000.00
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 -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/1 Rpt: 4/4	<b>2</b> FILER NAME Americans United For Values	<b>3</b> Filer ID (Ethics Commission Filers) 00088746
<b>4</b> Date 02/06/2026	<b>5</b> Payee name CAZ Consulting	
<b>6</b> Amount (\$) \$80,000.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 5049 Edwards Ranch Road  Fort Worth, TX 76109	
<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.  Text messaging supporting Aliza Dutt
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Dutt, Aliza	Office sought District Judge District Harris Co