# GENERAL-PURPOSE COMMITTEE
# CAMPAIGN FINANCE REPORT

| | |
|---|---|
| **The GPAC Instruction Guide explains how to complete this form.** | **1** Filer ID (Ethics Commission Filers) 00090722 |

**2** Total pages filed: 34

**3** COMMITTEE NAME

Alliance of Texans for Conservative Leadership PAC

**OFFICE USE ONLY**

Date Received

ELECTRONICALLY FILED

02/23/2026

**4** COMMITTEE ADDRESS

☐ Change of Address

ADDRESS / PO BOX;   APT / SUITE #;   CITY;      STATE;      ZIP CODE

11700 Preston Rd Ste 720 #1056

Dallas, TX 75230

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

**5** CAMPAIGN TREASURER NAME

MS / MRS / MR          FIRST                                    MI

Marshall C.

NICKNAME          LAST                                         SUFFIX

Bumpus

**6** CAMPAIGN TREASURER STREET ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE);          APT / SUITE #;   CITY;          STATE;   ZIP CODE

8558 Katy Freeway Ste 105

Houston, TX 77024

**7** CAMPAIGN TREASURER MAILING ADDRESS

☐ Change of Address

STREET OR PO BOX;                              APT / SUITE #;   CITY;          STATE;   ZIP CODE

8558 Katy Freeway Ste 105

Houston, TX 77024

**8** CAMPAIGN TREASURER PHONE

AREA CODE          PHONE NUMBER          EXTENSION

(940) 328-3434

**9** REPORT TYPE

☐ January 15

☐ July 15

☐ 30th day before election

☒ 8th day before election

☐ Runoff

☐ Dissolution (Attach PAC-DR)

☐ 10th day after campaign treasurer termination

**10** PERIOD COVERED

Month     Day     Year

02/03/2026          THROUGH

Month     Day     Year

02/21/2026

**11** ELECTION

ELECTION DATE

Month     Day     Year

03/03/2026

ELECTION TYPE

☒ Primary          ☐ Runoff          ☐ Other

☐ General          ☐ Special

**GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

| **12** COMMITTEE NAME | **13** Filer ID | (Ethics Commission Filers) |
|---|---|---|
| Alliance of Texans for Conservative Leadership PAC | 00090722 | |

| **14** COMMITTEE ACTIVITY | 1. Candidates | A. Supported | CECIL BELL  State Representative |
|---|---|---|---|
| (Attach lists on plain paper to complete this report if necessary.) | (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.) | | |

| **15** CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)  [X] check here if this report qualifies for the higher itemization threshold | $ | 0.00 |
|---|---|---|---|
| | 2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | $ | 1,600,000.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | $ | 75.00 |
| | 4. **TOTAL POLITICAL EXPENDITURES** | $ | 1,529,135.88 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | $ | 70,864.12 |
| OUTSTANDING LOAN TOTALS | 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.

Marshall C. Bumpus

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

Page 3 of 34

| **12** COMMITTEE NAME | **13** Filer ID | (Ethics Commission Filers) |
|---|---|---|
| Alliance of Texans for Conservative Leadership PAC | 00090722 | |

| **14** COMMITTEE ACTIVITY<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 ROCKY THIGPEN State Representative |
|---|---|---|
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY<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 JAY HARDAWAY State Representative |
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY<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 HOLLY JEFFREYS State Representative |
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |

Forms provided by Texas Ethics Commission          www.ethics.state.tx.us          Version V4.1.0.b6ef2aab

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

| **12** COMMITTEE NAME | **13** Filer ID | (Ethics Commission Filers) |
|---|---|---|
| Alliance of Texans for Conservative Leadership PAC | 00090722 | |

| **14** COMMITTEE ACTIVITY<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   ALAN BLAYLOCK  State Representative |
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |

| COMMITTEE ACTIVITY<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   JACKIE SCHLEGEL  State Representative |
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |

| COMMITTEE ACTIVITY<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   FRED TATE  State Representative |
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

| **12** COMMITTEE NAME | **13** Filer ID | (Ethics Commission Filers) |
|---|---|---|
| Alliance of Texans for Conservative Leadership PAC | 00090722 | |

| **14** COMMITTEE ACTIVITY<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  JORGE BORREGO  State Representative |
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY<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   TOM BUTLER  State Representative |
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY<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   TERRI LEO-WILSON  State Representative |
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

| **12** COMMITTEE NAME | **13** Filer ID | (Ethics Commission Filers) |
|---|---|---|
| Alliance of Texans for Conservative Leadership PAC | 00090722 | |

| **14** COMMITTEE ACTIVITY<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   JEFF LEACH  State Representative |
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |

| COMMITTEE ACTIVITY<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   STAN KITZMAN  State Representative |
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |

| COMMITTEE ACTIVITY<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   CANDY NOBLE  State Representative |
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |

| **12** COMMITTEE NAME | **13** Filer ID | (Ethics Commission Filers) |
|---|---|---|
| Alliance of Texans for Conservative Leadership PAC | 00090722 | |

| **14** COMMITTEE ACTIVITY <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   WILL METCALF   State Representative |
|---|---|---|
| | | B. Opposed |
| | 2. Measures <br> (Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted <br> (Identify by name or, if applicable, classify by party.) | |

| COMMITTEE ACTIVITY <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   STAN GERDES   State Representative |
|---|---|---|
| | | B. Opposed |
| | 2. Measures <br> (Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted <br> (Identify by name or, if applicable, classify by party.) | |

| COMMITTEE ACTIVITY <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   JANIE LOPEZ   State Representative |
|---|---|---|
| | | B. Opposed |
| | 2. Measures <br> (Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted <br> (Identify by name or, if applicable, classify by party.) | |

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

**12** COMMITTEE NAME

Alliance of Texans for Conservative Leadership PAC

**13** Filer ID     (Ethics Commission Filers)

00090722

| **14** COMMITTEE ACTIVITY<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   PAT CURRY  State Representative |
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |

| COMMITTEE ACTIVITY<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   HELEN KERWIN  State Representative |
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |

| COMMITTEE ACTIVITY<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   JARED PATTERSON  State Representative |
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

**12** COMMITTEE NAME

Alliance of Texans for Conservative Leadership PAC

**13** Filer ID    (Ethics Commission Filers)

00090722

| **14** COMMITTEE ACTIVITY<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    MORGAN MEYER   State Representative |
|---|---|---|
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY<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    ANGIE BUTTON   State Representative |
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |
| COMMITTEE ACTIVITY<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    LACEY HULL   State Representative |
| | | B. Opposed |
| | 2. Measures<br>(Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted<br>(Identify by name or, if applicable, classify by party.) | |

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

| **12** COMMITTEE NAME | **13** Filer ID | (Ethics Commission Filers) |
|---|---|---|
| Alliance of Texans for Conservative Leadership PAC | 00090722 | |

| **14** COMMITTEE ACTIVITY | 1. Candidates | A. Supported ANGELIA ORR State Representative |
|---|---|---|
| (Attach lists on plain paper to complete this report if necessary.) | (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.) | |

# SUBTOTALS - GPAC

| **17** COMMITTEE NAME | | **18** Filer ID | (Ethics Commission Filers) |
|---|---|---|---|
| Alliance of Texans for Conservative Leadership PAC | | 00090722 | |

**19** SCHEDULE SUBTOTALS

| NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
|---|---|---|
| 1. [X] | SCHEDULE A1:  MONETARY POLITICAL CONTRIBUTIONS | $ 1,600,000.00 |
| 2. [ ] | SCHEDULE A2:  NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | $ |
| 3. [ ] | SCHEDULE B:  PLEDGED CONTRIBUTIONS | $ |
| 4. [ ] | SCHEDULE C1:  MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | $ |
| 5. [ ] | SCHEDULE C2:  NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | $ |
| 6. [ ] | SCHEDULE C3:  MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | $ |
| 7. [ ] | SCHEDULE C4:  NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | $ |
| 8. [ ] | SCHEDULE D:  PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | $ |
| 9. [ ] | SCHEDULE E:  LOANS | $ |
| 10. [X] | SCHEDULE F1:  POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | $ 1,529,135.88 |
| 11. [ ] | SCHEDULE F2:  UNPAID INCURRED OBLIGATIONS | $ |
| 12. [ ] | SCHEDULE F3:  PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | $ |
| 13. [ ] | SCHEDULE F4:  EXPENDITURES MADE BY CREDIT CARD | $ |
| 14. [ ] | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | $ |
| 15. [ ] | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | $ |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

| | |
|---|---|
| **The Instruction Guide explains how to complete this form.** | **1** Total pages Schedule A1:<br>Sch: 1/1 Rpt: 12/34 |

| | |
|---|---|
| **2** FILER NAME<br>Alliance of Texans for Conservative Leadership PAC | **3** Filer ID (Ethics Commission Filers)<br>00090722 |

| **4** Date<br>02/05/2026 | **5** Full name of contributor ☐ out-of-state PAC (ID#:_____)<br>TEXANS FOR LAWSUIT REFORM PAC | **7** Amount of Contribution ($)<br>$1,600,000.00 |
|---|---|---|
| | **6** Contributor address; City; State; Zip Code<br><br>AUSTIN, TX 78701 | |

| **8** Principal occupation / Job title (See Instructions) | **9** Employer (See Instructions) |
|---|---|
| | |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

| 1 Total pages Schedule F1: Sch: 1/22 Rpt: 13/34 | 2 FILER NAME Alliance of Texans for Conservative Leadership PAC | 3 Filer ID (Ethics Commission Filers) 00090722 |
|---|---|---|

| 4 Date 02/06/2026 | 5 Payee name FCG MAIL, LLC |
|---|---|

| 6 Amount ($) $692,762.63 ☐ Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 558 E CASTLE PINES PKWY SUITE B-4 BOX 333 CASTLE PINES, CO 80108 |
|---|---|

| 8 **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) Advertising Expense | **(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense CAMPAIGN DIRECT MAIL |
|---|---|---|

| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name THIGPEN, ROCKY | Office sought State Representative District 9 | Office held |
|---|---|---|---|

| Date | Payee name (see previous) |
|---|---|

| Amount ($) ☐ Expenditure from corporate funds | Payee address; City; State; Zip Code |
|---|---|

| **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense |
|---|---|---|

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name HARDAWAY, JAY | Office sought State Representative District 71 | Office held |
|---|---|---|---|

| Date | Payee name (see previous) |
|---|---|

| Amount ($) ☐ Expenditure from corporate funds | Payee address; City; State; Zip Code |
|---|---|

| **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense |
|---|---|---|

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name JEFFREYS, HOLLY | Office sought State Representative District 86 | Office held |
|---|---|---|---|

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
|---|---|---|
| Sch: 2/22 Rpt: 14/34 | Alliance of Texans for Conservative Leadership PAC | 00090722 |

| 4 Date | 5 Payee name |
|---|---|
| | (see previous) |

**6** Amount ($)

☐ Expenditure from corporate funds

**7** Payee address;     City;          State;  Zip  Code

| 8 **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

**9** Complete <u>ONLY</u> if direct expenditure to benefit C/OH

| Candidate/Officeholder name | Office sought | Office held |
|---|---|---|
| BLAYLOCK, ALAN | State Representative District 93 | |

| Date | Payee name |
|---|---|
| | (see previous) |

Amount ($)

☐ Expenditure from corporate funds

Payee address;     City;          State;  Zip  Code

| **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

| Candidate/Officeholder name | Office sought | Office held |
|---|---|---|
| SCHLEGEL, JACKIE | State Representative District 94 | |

| Date | Payee name |
|---|---|
| | (see previous) |

Amount ($)

☐ Expenditure from corporate funds

Payee address;     City;          State;  Zip  Code

| **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

| Candidate/Officeholder name | Office sought | Office held |
|---|---|---|
| TATE, FRED | State Representative District 98 | |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

| 1 Total pages Schedule F1:<br>Sch: 3/22 Rpt: 15/34 | 2 FILER NAME<br>Alliance of Texans for Conservative Leadership PAC | 3 Filer ID   (Ethics Commission Filers)<br>00090722 |
|---|---|---|

| 4 Date | 5 Payee name<br>(see previous) |
|---|---|

| 6 Amount ($)<br><br>☐ Expenditure from corporate funds | 7 Payee address;   City;   State; Zip Code |
|---|---|

| 8 **PURPOSE OF EXPENDITURE** | **(a)** Category  (See Categories listed at the top of this schedule) | **(b)** Description<br>☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense |
|---|---|---|

| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>BORREGO, JORGE | Office sought<br>State Representative District 118 | Office held |
|---|---|---|---|

| Date | Payee name<br>(see previous) |
|---|---|

| Amount ($)<br><br>☐ Expenditure from corporate funds | Payee address;   City;   State; Zip Code |
|---|---|

| **PURPOSE OF EXPENDITURE** | **(a)** Category  (See Categories listed at the top of this schedule) | **(b)** Description<br>☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense |
|---|---|---|

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>BUTLER, TOM | Office sought<br>State Representative District 128 | Office held |
|---|---|---|---|

| Date | Payee name<br>(see previous) |
|---|---|

| Amount ($)<br><br>☐ Expenditure from corporate funds | Payee address;   City;   State; Zip Code |
|---|---|

| **PURPOSE OF EXPENDITURE** | **(a)** Category  (See Categories listed at the top of this schedule) | **(b)** Description<br>☐ Check if travel outside of Texas. Complete Schedule T.<br>☐ Check if Austin, TX, officeholder living expense |
|---|---|---|

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>ORR, ANGELIA | Office sought<br>State Representative District 13 | Office held |
|---|---|---|---|

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

| **1** Total pages Schedule F1: | **2** FILER NAME | **3** Filer ID     (Ethics Commission Filers) |
|---|---|---|
| Sch: 4/22 Rpt: 16/34 | Alliance of Texans for Conservative Leadership PAC | 00090722 |

| **4** Date | **5** Payee name |
|---|---|
| | (see previous) |

| **6** Amount ($) | **7** Payee address;    City;      State;   Zip   Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **8** **PURPOSE OF EXPENDITURE** | **(a)** Category   (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. <br> ☐ Check if Austin, TX, officeholder living expense |

| **9** Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name <br> LEO-WILSON, TERRI | Office sought <br> State Representative District 23 | Office held |
|---|---|---|---|

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address;    City;      State;   Zip   Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **PURPOSE OF EXPENDITURE** | **(a)** Category   (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. <br> ☐ Check if Austin, TX, officeholder living expense |

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name <br> LEACH, JEFF | Office sought <br> State Representative District 67 | Office held |
|---|---|---|---|

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address;    City;      State;   Zip   Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **PURPOSE OF EXPENDITURE** | **(a)** Category   (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. <br> ☐ Check if Austin, TX, officeholder living expense |

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name <br> KITZMAN, STAN | Office sought <br> State Representative District 85 | Office held |
|---|---|---|---|

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
|---|---|---|
| Sch: 5/22 Rpt: 17/34 | Alliance of Texans for Conservative Leadership PAC | 00090722 |

| 4 Date | 5 Payee name |
|---|---|
| | (see previous) |

**6 Amount ($)**

☐ Expenditure from corporate funds

**7 Payee address; City; State; Zip Code**

| 8 **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

**9** Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name: NOBLE, CANDY
Office sought: 
Office held: State Representative District 89

---

| Date | Payee name |
|---|---|
| | (see previous) |

Amount ($)

☐ Expenditure from corporate funds

Payee address; City; State; Zip Code

| **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name: BELL, CECIL
Office sought: 
Office held: State Representative District 3

---

| Date | Payee name |
|---|---|
| | (see previous) |

Amount ($)

☐ Expenditure from corporate funds

Payee address; City; State; Zip Code

| **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name: GERDES, STAN
Office sought: 
Office held: State Representative District 17

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

| **1** Total pages Schedule F1: | **2** FILER NAME | **3** Filer ID (Ethics Commission Filers) |
|---|---|---|
| Sch: 6/22 Rpt: 18/34 | Alliance of Texans for Conservative Leadership PAC | 00090722 |

| **4** Date | **5** Payee name |
|---|---|
| | (see previous) |

| **6** Amount ($) | **7** Payee address; City; State; Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **8** **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

| **9** Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | LOPEZ, JANIE | State Representative District 37 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | PATTERSON, JARED | State Representative District 106 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | HULL, LACEY | State Representative District 138 | |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

| **1** Total pages Schedule F1: | **2** FILER NAME | **3** Filer ID (Ethics Commission Filers) |
|---|---|---|
| Sch: 7/22 Rpt: 19/34 | Alliance of Texans for Conservative Leadership PAC | 00090722 |

| **4** Date | **5** Payee name |
|---|---|
| | (see previous) |

| **6** Amount ($) | **7** Payee address; City; State; Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **8** PURPOSE OF EXPENDITURE | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. <br> ☐ Check if Austin, TX, officeholder living expense |

**9** Complete <u>ONLY</u> if direct expenditure to benefit C/OH

| Candidate/Officeholder name | Office sought | Office held |
|---|---|---|
| METCALF, WILL | State Representative District 16 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| PURPOSE OF EXPENDITURE | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. <br> ☐ Check if Austin, TX, officeholder living expense |

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

| Candidate/Officeholder name | Office sought | Office held |
|---|---|---|
| CURRY, PAT | State Representative District 56 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| PURPOSE OF EXPENDITURE | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. <br> ☐ Check if Austin, TX, officeholder living expense |

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

| Candidate/Officeholder name | Office sought | Office held |
|---|---|---|
| KERWIN, HELEN | State Representative District 58 | |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
|---|---|---|
| Sch: 8/22 Rpt: 20/34 | Alliance of Texans for Conservative Leadership PAC | 00090722 |

| 4 Date | 5 Payee name |
|---|---|
| | (see previous) |

**6 Amount ($)**

☐ Expenditure from corporate funds

**7 Payee address; City; State; Zip Code**

**8 PURPOSE OF EXPENDITURE**

**(a) Category** (See Categories listed at the top of this schedule)

**(b) Description**
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

**9 Complete ONLY if direct expenditure to benefit C/OH**

| Candidate/Officeholder name | Office sought | Office held |
|---|---|---|
| MEYER, MORGAN | State Representative District 108 | |

| Date | Payee name |
|---|---|
| | (see previous) |

**Amount ($)**

☐ Expenditure from corporate funds

**Payee address; City; State; Zip Code**

**PURPOSE OF EXPENDITURE**

**(a) Category** (See Categories listed at the top of this schedule)

**(b) Description**
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

**Complete ONLY if direct expenditure to benefit C/OH**

| Candidate/Officeholder name | Office sought | Office held |
|---|---|---|
| BUTTON, ANGIE | State Representative District 112 | |

| Date | Payee name |
|---|---|
| 02/16/2026 | FCG MAIL, LLC |

**Amount ($)**
$288,461.12

☐ Expenditure from corporate funds

**Payee address; City; State; Zip Code**
558 E CASTLE PINES PKWY
SUITE B-4 BOX 333
CASTLE PINES, CO 80108

**PURPOSE OF EXPENDITURE**

**(a) Category** (See Categories listed at the top of this schedule)
Advertising Expense

**(b) Description**
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
CAMPAIGN DIRECT MAIL

**Complete ONLY if direct expenditure to benefit C/OH**

| Candidate/Officeholder name | Office sought | Office held |
|---|---|---|
| THIGPEN, ROCKY | State Representative District 9 | |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

| 1 Total pages Schedule F1: Sch: 9/22 Rpt: 21/34 | 2 FILER NAME Alliance of Texans for Conservative Leadership PAC | 3 Filer ID (Ethics Commission Filers) 00090722 |
|---|---|---|

---

**4** Date

**5** Payee name
(see previous)

**6** Amount ($)

☐ Expenditure from corporate funds

**7** Payee address; City; State; Zip Code

**8 PURPOSE OF EXPENDITURE**

**(a)** Category  (See Categories listed at the top of this schedule)

**(b)** Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

**9** Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name
HARDAWAY, JAY

Office sought
State Representative District 71

Office held

---

Date

Payee name
(see previous)

Amount ($)

☐ Expenditure from corporate funds

Payee address; City; State; Zip Code

**PURPOSE OF EXPENDITURE**

**(a)** Category  (See Categories listed at the top of this schedule)

**(b)** Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name
JEFFREYS, HOLLY

Office sought
State Representative District 86

Office held

---

Date

Payee name
(see previous)

Amount ($)

☐ Expenditure from corporate funds

Payee address; City; State; Zip Code

**PURPOSE OF EXPENDITURE**

**(a)** Category  (See Categories listed at the top of this schedule)

**(b)** Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name
SCHLEGEL, JACKIE

Office sought
State Representative District 94

Office held

---

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

| **1** Total pages Schedule F1: | **2** FILER NAME | **3** Filer ID (Ethics Commission Filers) |
|---|---|---|
| Sch: 10/22 Rpt: 22/34 | Alliance of Texans for Conservative Leadership PAC | 00090722 |

| **4** Date | **5** Payee name |
|---|---|
| | (see previous) |

| **6** Amount ($) | **7** Payee address;   City;     State;  Zip  Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **8** PURPOSE OF EXPENDITURE | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

| **9** Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | TATE, FRED | State Representative District 98 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address;   City;     State;  Zip  Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| PURPOSE OF EXPENDITURE | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | BORREGO, JORGE | State Representative District 118 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address;   City;     State;  Zip  Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| PURPOSE OF EXPENDITURE | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | BUTLER, TOM | State Representative District 128 | |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

| **1** Total pages Schedule F1: | **2** FILER NAME | **3** Filer ID (Ethics Commission Filers) |
|---|---|---|
| Sch: 11/22 Rpt: 23/34 | Alliance of Texans for Conservative Leadership PAC | 00090722 |

| **4** Date | **5** Payee name |
|---|---|
| | (see previous) |

| **6** Amount ($) | **7** Payee address; City; State; Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **8** **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

| **9** Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | ORR, ANGELIA | State Representative District 13 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | LEO-WILSON, TERRI | State Representative District 23 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | LEACH, JEFF | State Representative District 67 | |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
|---|---|---|
| Sch: 12/22 Rpt: 24/34 | Alliance of Texans for Conservative Leadership PAC | 00090722 |

**4** Date

**5** Payee name
(see previous)

**6** Amount ($)

☐ Expenditure from corporate funds

**7** Payee address; City; State; Zip Code

**8 PURPOSE OF EXPENDITURE**

**(a)** Category (See Categories listed at the top of this schedule)

**(b)** Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

**9** Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name
KITZMAN, STAN

Office sought
State Representative District 85

Office held

---

Date

Payee name
(see previous)

Amount ($)

☐ Expenditure from corporate funds

Payee address; City; State; Zip Code

**PURPOSE OF EXPENDITURE**

**(a)** Category (See Categories listed at the top of this schedule)

**(b)** Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name
NOBLE, CANDY

Office sought
State Representative District 89

Office held

---

Date

Payee name
(see previous)

Amount ($)

☐ Expenditure from corporate funds

Payee address; City; State; Zip Code

**PURPOSE OF EXPENDITURE**

**(a)** Category (See Categories listed at the top of this schedule)

**(b)** Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name
BELL, CECIL

Office sought
State Representative District 3

Office held

---

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

| **1** Total pages Schedule F1: | **2** FILER NAME | **3** Filer ID    (Ethics Commission Filers) |
|---|---|---|
| Sch: 13/22 Rpt: 25/34 | Alliance of Texans for Conservative Leadership PAC | 00090722 |

| **4** Date | **5** Payee name |
|---|---|
| | (see previous) |

| **6** Amount ($) | **7** Payee address;    City;      State;   Zip  Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **8** **PURPOSE OF EXPENDITURE** | **(a)** Category  (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

**9** Complete <u>ONLY</u> if direct expenditure to benefit C/OH

| Candidate/Officeholder name | Office sought | Office held |
|---|---|---|
| METCALF, WILL | State Representative District 16 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address;    City;      State;   Zip  Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **PURPOSE OF EXPENDITURE** | **(a)** Category  (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

| Candidate/Officeholder name | Office sought | Office held |
|---|---|---|
| GERDES, STAN | State Representative District 17 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address;    City;      State;   Zip  Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **PURPOSE OF EXPENDITURE** | **(a)** Category  (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

| Candidate/Officeholder name | Office sought | Office held |
|---|---|---|
| LOPEZ, JANIE | State Representative District 37 | |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

| **1** Total pages Schedule F1: | **2** FILER NAME | **3** Filer ID    (Ethics Commission Filers) |
|---|---|---|
| Sch: 14/22 Rpt: 26/34 | Alliance of Texans for Conservative Leadership PAC | 00090722 |

| **4** Date | **5** Payee name |
|---|---|
| | (see previous) |

**6** Amount ($)

☐ Expenditure from corporate funds

**7** Payee address;    City;    State;  Zip Code

**8 PURPOSE OF EXPENDITURE**

**(a)** Category (See Categories listed at the top of this schedule)

**(b)** Description
  ☐ Check if travel outside of Texas. Complete Schedule T.
  ☐ Check if Austin, TX, officeholder living expense

**9** Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name      Office sought      Office held
CURRY, PAT      State Representative District 56

---

| Date | Payee name |
|---|---|
| | (see previous) |

Amount ($)

☐ Expenditure from corporate funds

Payee address;    City;    State;  Zip Code

**PURPOSE OF EXPENDITURE**

**(a)** Category (See Categories listed at the top of this schedule)

**(b)** Description
  ☐ Check if travel outside of Texas. Complete Schedule T.
  ☐ Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name      Office sought      Office held
KERWIN, HELEN      State Representative District 58

---

| Date | Payee name |
|---|---|
| | (see previous) |

Amount ($)

☐ Expenditure from corporate funds

Payee address;    City;    State;  Zip Code

**PURPOSE OF EXPENDITURE**

**(a)** Category (See Categories listed at the top of this schedule)

**(b)** Description
  ☐ Check if travel outside of Texas. Complete Schedule T.
  ☐ Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name      Office sought      Office held
PATTERSON, JARED      State Representative District 106

# 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 - | 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.**

**1** Total pages Schedule F1:

Sch: 15/22 Rpt: 27/34

**2** FILER NAME

Alliance of Texans for Conservative Leadership PAC

**3** Filer ID     (Ethics Commission Filers)

00090722

---

**4** Date

**5** Payee name

(see previous)

**6** Amount ($)

☐ Expenditure from corporate funds

**7** Payee address;     City;     State;   Zip   Code

**8** **PURPOSE OF EXPENDITURE**

**(a)** Category  (See Categories listed at the top of this schedule)

**(b)** Description

☐ Check if travel outside of Texas. Complete Schedule T.

☐ Check if Austin, TX, officeholder living expense

**9** Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name     Office sought     Office held

MEYER, MORGAN     State Representative District 108

---

Date

Payee name

(see previous)

Amount ($)

☐ Expenditure from corporate funds

Payee address;     City;     State;   Zip   Code

**PURPOSE OF EXPENDITURE**

**(a)** Category  (See Categories listed at the top of this schedule)

**(b)** Description

☐ Check if travel outside of Texas. Complete Schedule T.

☐ Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name     Office sought     Office held

BUTTON, ANGIE     State Representative District 112

---

Date

Payee name

(see previous)

Amount ($)

☐ Expenditure from corporate funds

Payee address;     City;     State;   Zip   Code

**PURPOSE OF EXPENDITURE**

**(a)** Category  (See Categories listed at the top of this schedule)

**(b)** Description

☐ Check if travel outside of Texas. Complete Schedule T.

☐ Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name     Office sought     Office held

HULL, LACEY     State Representative District 138

---

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

| 1 Total pages Schedule F1: Sch: 16/22 Rpt: 28/34 | 2 FILER NAME Alliance of Texans for Conservative Leadership PAC | 3 Filer ID (Ethics Commission Filers) 00090722 |
|---|---|---|

| 4 Date 02/20/2026 | 5 Payee name FCG MAIL, LLC |
|---|---|

| 6 Amount ($) $547,837.13 ☐ Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 558 E CASTLE PINES PKWY SUITE B-4 BOX 333 CASTLE PINES, CO 80108 |
|---|---|

| 8 **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) Advertising Expense | **(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense CAMPAIGN DIRECT MAIL |
|---|---|---|

| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name THIGPEN, ROCKY | Office sought State Representative District 9 | Office held |
|---|---|---|---|

| Date | Payee name (see previous) |
|---|---|

| Amount ($) ☐ Expenditure from corporate funds | Payee address; City; State; Zip Code |
|---|---|

| **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense |
|---|---|---|

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name HARDAWAY, JAY | Office sought State Representative District 71 | Office held |
|---|---|---|---|

| Date | Payee name (see previous) |
|---|---|

| Amount ($) ☐ Expenditure from corporate funds | Payee address; City; State; Zip Code |
|---|---|

| **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense |
|---|---|---|

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name JEFFREYS, HOLLY | Office sought State Representative District 86 | Office held |
|---|---|---|---|

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

| **1** Total pages Schedule F1: | **2** FILER NAME | **3** Filer ID (Ethics Commission Filers) |
|---|---|---|
| Sch: 17/22 Rpt: 29/34 | Alliance of Texans for Conservative Leadership PAC | 00090722 |

| **4** Date | **5** Payee name |
|---|---|
| | (see previous) |

| **6** Amount ($) | **7** Payee address; City; State; Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **8** PURPOSE OF EXPENDITURE | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

**9** Complete <u>ONLY</u> if direct expenditure to benefit C/OH

| Candidate/Officeholder name | Office sought | Office held |
|---|---|---|
| SCHLEGEL, JACKIE | State Representative District 94 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| PURPOSE OF EXPENDITURE | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

| Candidate/Officeholder name | Office sought | Office held |
|---|---|---|
| TATE, FRED | State Representative District 98 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| PURPOSE OF EXPENDITURE | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

| Candidate/Officeholder name | Office sought | Office held |
|---|---|---|
| BORREGO, JORGE | State Representative District 118 | |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

| **1** Total pages Schedule F1: | **2** FILER NAME | **3** Filer ID (Ethics Commission Filers) |
|---|---|---|
| Sch: 18/22 Rpt: 30/34 | Alliance of Texans for Conservative Leadership PAC | 00090722 |

| **4** Date | **5** Payee name |
|---|---|
| | (see previous) |

| **6** Amount ($) | **7** Payee address; City; State; Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **8** **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

**9** Complete <u>ONLY</u> if direct expenditure to benefit C/OH    Candidate/Officeholder name    Office sought    Office held
ORR, ANGELIA     State Representative District 13

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

Complete <u>ONLY</u> if direct expenditure to benefit C/OH    Candidate/Officeholder name    Office sought    Office held
LEO-WILSON, TERRI     State Representative District 23

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address; City; State; Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE  F1**

| **1** Total pages Schedule F1: | **2** FILER NAME | **3** Filer ID  (Ethics Commission Filers) |
|---|---|---|
| Sch: 19/22 Rpt:  31/34 | Alliance of Texans for Conservative Leadership PAC | 00090722 |

| **4** Date | **5** Payee name |
|---|---|
| | (see previous) |

| **6** Amount ($) | **7** Payee address;  City;  State;  Zip  Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **8 PURPOSE OF EXPENDITURE** | **(a)** Category  (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T.  ☐ Check if Austin, TX, officeholder living expense |

| **9** Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | KITZMAN, STAN | State Representative District 85 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address;  City;  State;  Zip  Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **PURPOSE OF EXPENDITURE** | **(a)** Category  (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T.  ☐ Check if Austin, TX, officeholder living expense |

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | NOBLE, CANDY | State Representative District 89 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address;  City;  State;  Zip  Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **PURPOSE OF EXPENDITURE** | **(a)** Category  (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T.  ☐ Check if Austin, TX, officeholder living expense |

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | BELL, CECIL | State Representative District 3 | |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
|---|---|---|
| Sch: 20/22 Rpt: 32/34 | Alliance of Texans for Conservative Leadership PAC | 00090722 |

| 4 Date | 5 Payee name |
|---|---|
| | (see previous) |

| 6 Amount ($) | 7 Payee address;   City;   State;  Zip  Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| 8 **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | METCALF, WILL | State Representative District 16 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address;   City;   State;  Zip  Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | GERDES, STAN | State Representative District 17 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address;   City;   State;  Zip  Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **PURPOSE OF EXPENDITURE** | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | LOPEZ, JANIE | State Representative District 37 | |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

| 1 Total pages Schedule F1: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) |
|---|---|---|
| Sch: 21/22 Rpt: 33/34 | Alliance of Texans for Conservative Leadership PAC | 00090722 |

| 4 Date | 5 Payee name |
|---|---|
| | (see previous) |

**6 Amount ($)**

☐ Expenditure from corporate funds

**7 Payee address; City; State; Zip Code**

**8 PURPOSE OF EXPENDITURE**

**(a)** Category (See Categories listed at the top of this schedule)

**(b)** Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

**9** Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name    Office sought    Office held
CURRY, PAT    State Representative District 56

---

| Date | Payee name |
|---|---|
| | (see previous) |

**Amount ($)**

☐ Expenditure from corporate funds

**Payee address; City; State; Zip Code**

**PURPOSE OF EXPENDITURE**

**(a)** Category (See Categories listed at the top of this schedule)

**(b)** Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name    Office sought    Office held
KERWIN, HELEN    State Representative District 58

---

| Date | Payee name |
|---|---|
| | (see previous) |

**Amount ($)**

☐ Expenditure from corporate funds

**Payee address; City; State; Zip Code**

**PURPOSE OF EXPENDITURE**

**(a)** Category (See Categories listed at the top of this schedule)

**(b)** Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name    Office sought    Office held
PATTERSON, JARED    State Representative District 106

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

| **1** Total pages Schedule F1: | **2** FILER NAME | **3** Filer ID      (Ethics Commission Filers) |
|---|---|---|
| Sch: 22/22 Rpt: 34/34 | Alliance of Texans for Conservative Leadership PAC | 00090722 |

| **4** Date | **5** Payee name |
|---|---|
| | (see previous) |

| **6** Amount ($) | **7** Payee address;     City;     State;   Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| **8** PURPOSE OF EXPENDITURE | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

| **9** Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | MEYER, MORGAN | State Representative District 108 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address;     City;     State;   Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| PURPOSE OF EXPENDITURE | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | BUTTON, ANGIE | State Representative District 112 | |

| Date | Payee name |
|---|---|
| | (see previous) |

| Amount ($) | Payee address;     City;     State;   Zip Code |
|---|---|
| ☐ Expenditure from corporate funds | |

| PURPOSE OF EXPENDITURE | **(a)** Category (See Categories listed at the top of this schedule) | **(b)** Description |
|---|---|---|
| | | ☐ Check if travel outside of Texas. Complete Schedule T. |
| | | ☐ Check if Austin, TX, officeholder living expense |

| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|---|---|---|
| | HULL, LACEY | State Representative District 138 | |