

MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC
COVER SHEET PG 1

The MPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090609	2 Total pages filed: 31				
3 COMMITTEE NAME Texas Conservative Fund			OFFICE USE ONLY				
			Date Received ELECTRONICALLY FILED 03/05/2026				
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 3301 Richmond Hwy #1018 Alexandria, VA 22305		Date Hand-delivered or Date Postmarked				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI				
	Mr.	Brian					
	NICKNAME	LAST	SUFFIX				
		Smith					
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3301 Richmond Hwy. #1018 Alexandria, VA 22305						
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3301 Richmond Hwy. #1018 Alexandria, VA 22305						
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(205)	440-2873					
9 REPORT TYPE	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)						
10 MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input checked="" type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5						
11 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	01	26	2026		02	25	2026

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME Texas Conservative Fund	13 Filer ID (Ethics Commission Filers) 00090609
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14 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 DENNIS GEESAMAN 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.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> 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)	\$ 3,500,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,644,962.88
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 855,037.12
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.

Mr. Brian Smith

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

MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**
ADDENDUM

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12 COMMITTEE NAME Texas Conservative Fund		13 Filer ID (Ethics Commission Filers) 00090609	
14 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 MARK DORAZIO 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.)		
	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 JAY DEAN 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.)			
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 ANGELIA ORR 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.)		

MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**
ADDENDUM

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12 COMMITTEE NAME Texas Conservative Fund	13 Filer ID (Ethics Commission Filers) 00090609
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14 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 STAN GERDES 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.)	

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 JEFF LEACH 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.)	

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 JAY HARDAWAY 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.)	

MONTHLY FILING GPAC REPORT: PURPOSE

12 COMMITTEE NAME Texas Conservative Fund		13 Filer ID (Ethics Commission Filers) 00090609
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small>	A. Supported STAN KITZMAN State Representative B. Opposed
	2. Measures <small>(Describe by date and location of election and nature of issue.)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small>	
	1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small>	A. Supported KEN KING State Representative B. Opposed
	2. Measures <small>(Describe by date and location of election and nature of issue.)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small>	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small>	A. Supported ARMIN MIZANI State Representative B. Opposed
	2. Measures <small>(Describe by date and location of election and nature of issue.)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small>	
	1. Candidates <small>(Identify by name or, if applicable, classify by party.)</small>	A. Supported B. Opposed
	2. Measures <small>(Describe by date and location of election and nature of issue.)</small>	A. Supported B. Opposed
	3. Officeholders Assisted <small>(Identify by name or, if applicable, classify by party.)</small>	

MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**
ADDENDUM

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12 COMMITTEE NAME Texas Conservative Fund	13 Filer ID (Ethics Commission Filers) 00090609
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14 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 JARED PATTERSON 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.)	

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 MORGAN MEYER 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.)	

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 MARC LAHOOD 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.)	

MONTHLY FILING GPAC REPORT: PURPOSE

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12 COMMITTEE NAME Texas Conservative Fund	13 Filer ID (Ethics Commission Filers) 00090609
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14 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 WILLIE NG 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.)	

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 KELLY PETERSON 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.)	

SUBTOTALS - MPAC

17 COMMITTEE NAME Texas Conservative Fund		18 Filer ID (Ethics Commission Filers) 00090609
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,500,000.00
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 ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR 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 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	\$ 2,644,962.88
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 TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/1 Rpt: 9/31
2 FILER NAME Texas Conservative Fund		3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/20/2026	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00927186) AMERICAN CONSERVATIVE FUND <hr/> 6 Contributor address; City; State; Zip Code ALEXANDRIA, VA 22305	7 Amount of Contribution (\$) \$500,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/09/2026	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00927186) AMERICAN CONSERVATIVE FUND <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22305	Amount of Contribution (\$) \$3,000,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 1/22 Rpt: 10/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/23/2026	5 Payee name 515 GROUP	
6 Amount (\$) \$1,783.25	7 Payee address; City; State; Zip Code 605 19TH ST S ARLINGTON, VA 22202	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) SMS MESSAGING	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SMS MESSAGING
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name KING, KEN	Office sought State Representative District 88
		Office held State Representative District 88
Date 02/23/2026	Payee name 515 GROUP	
Amount (\$) \$1,683.71	Payee address; City; State; Zip Code 605 19TH ST S ARLINGTON, VA 22202	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) SMS MESSAGING	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SMS MESSAGING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name PATTERSON, JARED	Office sought State Representative District 106
		Office held State Representative District
Date 02/23/2026	Payee name 515 GROUP	
Amount (\$) \$2,057.37	Payee address; City; State; Zip Code 605 19TH ST S ARLINGTON, VA 22202	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) SMS MESSAGING	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SMS MESSAGING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name MEYER, MORGAN	Office sought State Representative District 108
		Office held State Representative District

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 2/22 Rpt: 11/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/23/2026	5 Payee name 515 GROUP	
6 Amount (\$) \$1,679.37	7 Payee address; City; State; Zip Code 605 19TH ST S ARLINGTON, VA 22202	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) SMS MESSAGING	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SMS MESSAGING
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name LEACH, JEFF	Office sought State Representative District 67
		Office held State Representative District 67
Date 02/23/2026	Payee name 515 GROUP	
Amount (\$) \$1,863.19	Payee address; City; State; Zip Code 605 19TH ST S ARLINGTON, VA 22202	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) SMS MESSAGING	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SMS MESSAGING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name LAHOOD, MARC	Office sought State Representative District 121
		Office held State Representative District
Date 02/23/2026	Payee name 515 GROUP	
Amount (\$) \$2,152.71	Payee address; City; State; Zip Code 605 19TH ST S ARLINGTON, VA 22202	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) SMS MESSAGING	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SMS MESSAGING
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name MIZANI, ARMIN	Office sought State Representative District 98
		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 3/22 Rpt: 12/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/10/2026	5 Payee name ARENA MAIL + DIGITAL	
6 Amount (\$) \$204,020.00	7 Payee address; City; State; Zip Code 1260 E STRINGHAM AVE SUITE 400 SALT LAKE CITY, UT 84106	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEDIA PLACEMENT	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PLACEMENT
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ORR, ANGELIA	Office sought State Representative District 13
		Office held State Representative District 13
Date 02/10/2026	Payee name ARENA MAIL + DIGITAL	
Amount (\$) \$95,900.00	Payee address; City; State; Zip Code 1260 E STRINGHAM AVE SUITE 400 SALT LAKE CITY, UT 84106	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEDIA PLACEMENT	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PLACEMENT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name KING, KEN	Office sought State Representative District 88
		Office held State Representative District 88
Date 02/10/2026	Payee name ARENA MAIL + DIGITAL	
Amount (\$) \$169,180.00	Payee address; City; State; Zip Code 1260 E STRINGHAM AVE SUITE 400 SALT LAKE CITY, UT 84106	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEDIA PLACEMENT	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PLACEMENT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name GERDES, STAN	Office sought State Representative District 17
		Office held State Representative District 17

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 4/22 Rpt: 13/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/10/2026	5 Payee name ARENA MAIL + DIGITAL	
6 Amount (\$) \$400,000.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1260 E STRINGHAM AVE SUITE 400 SALT LAKE CITY, UT 84106	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEDIA PLACEMENT	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PLACEMENT
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name LEACH, JEFF	Office sought State Representative District 67
		Office held State Representative District 67
Date 02/10/2026	Payee name ARENA MAIL + DIGITAL	
Amount (\$) \$100,000.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1260 E STRINGHAM AVE SUITE 400 SALT LAKE CITY, UT 84106	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEDIA PLACEMENT	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PLACEMENT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name KITZMAN, STAN	Office sought State Representative District 85
		Office held State Representative District 85
Date 02/10/2026	Payee name ARENA MAIL + DIGITAL	
Amount (\$) \$48,500.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1260 E STRINGHAM AVE SUITE 400 SALT LAKE CITY, UT 84106	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEDIA PLACEMENT	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PLACEMENT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name MIZANI, ARMIN	Office sought State Representative District 98
		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 5/22 Rpt: 14/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/10/2026	5 Payee name ARENA MAIL + DIGITAL	
6 Amount (\$) \$100,000.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1260 E STRINGHAM AVE SUITE 400 SALT LAKE CITY, UT 84106	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEDIA PLACEMENT	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PLACEMENT
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name LAHOOD, MARC	Office sought State Representative District 121
		Office held State Representative District
Date 02/10/2026	Payee name ARENA MAIL + DIGITAL	
Amount (\$) \$108,800.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1260 E STRINGHAM AVE SUITE 400 SALT LAKE CITY, UT 84106	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEDIA PLACEMENT	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PLACEMENT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name PETERSON, KELLY	Office sought State Representative District 126
		Office held
Date 02/17/2026	Payee name ARENA MAIL + DIGITAL	
Amount (\$) \$50,000.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1260 E STRINGHAM AVE SUITE 400 SALT LAKE CITY, UT 84106	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEDIA PLACEMENT	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PLACEMENT
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name KING, KEN	Office sought State Representative District 88
		Office held State Representative District 88

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 6/22 Rpt: 15/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/17/2026	5 Payee name ARENA MAIL + DIGITAL	
6 Amount (\$) \$26,000.00	7 Payee address; City; State; Zip Code 1260 E STRINGHAM AVE SUITE 400 SALT LAKE CITY, UT 84106	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEDIA PLACEMENT / MEDIA PRODUCTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PLACEMENT / MEDIA PRODUCTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name KING, KEN	Office sought State Representative District 88
		Office held State Representative District 88
Date 02/18/2026	Payee name ARENA MAIL + DIGITAL	
Amount (\$) \$6,000.00	Payee address; City; State; Zip Code 1260 E STRINGHAM AVE SUITE 400 SALT LAKE CITY, UT 84106	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEDIA PRODUCTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PRODUCTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ORR, ANGELIA	Office sought State Representative District 13
		Office held State Representative District 13
Date 02/18/2026	Payee name ARENA MAIL + DIGITAL	
Amount (\$) \$6,000.00	Payee address; City; State; Zip Code 1260 E STRINGHAM AVE SUITE 400 SALT LAKE CITY, UT 84106	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEDIA PRODUCTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PRODUCTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name GERDES, STAN	Office sought State Representative District 17
		Office held State Representative District 17

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 7/22 Rpt: 16/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/18/2026	5 Payee name ARENA MAIL + DIGITAL	
6 Amount (\$) \$6,000.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1260 E STRINGHAM AVE SUITE 400 SALT LAKE CITY, UT 84106	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEDIA PRODUCTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PRODUCTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name LEACH, JEFF	Office sought State Representative District 67
		Office held State Representative District 67
Date 02/18/2026	Payee name ARENA MAIL + DIGITAL	
Amount (\$) \$12,000.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1260 E STRINGHAM AVE SUITE 400 SALT LAKE CITY, UT 84106	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEDIA PRODUCTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PRODUCTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name KITZMAN, STAN	Office sought State Representative District 85
		Office held State Representative District 85
Date 02/18/2026	Payee name ARENA MAIL + DIGITAL	
Amount (\$) \$6,000.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1260 E STRINGHAM AVE SUITE 400 SALT LAKE CITY, UT 84106	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEDIA PRODUCTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PRODUCTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name MIZANI, ARMIN	Office sought State Representative District 98
		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 8/22 Rpt: 17/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/18/2026	5 Payee name ARENA MAIL + DIGITAL	
6 Amount (\$) \$6,000.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1260 E STRINGHAM AVE SUITE 400 SALT LAKE CITY, UT 84106	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEDIA PRODUCTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PRODUCTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name LAHOOD, MARC	Office sought State Representative District 121
		Office held State Representative District
Date 02/18/2026	Payee name ARENA MAIL + DIGITAL	
Amount (\$) \$6,000.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1260 E STRINGHAM AVE SUITE 400 SALT LAKE CITY, UT 84106	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) MEDIA PRODUCTION	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEDIA PRODUCTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name PETERSON, KELLY	Office sought State Representative District 126
		Office held
Date 02/11/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$14,750.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name DEAN, JAY	Office sought State Representative District 7
		Office held State Representative District 7

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 9/22 Rpt: 18/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/11/2026	5 Payee name AXIOM STRATEGIES	
6 Amount (\$) \$12,449.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name GERDES, STAN	Office sought State Representative District 17
		Office held State Representative District 17
Date 02/11/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$12,134.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name HARDAWAY, JAY	Office sought State Representative District 71
		Office held
Date 02/11/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$14,855.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name KITZMAN, STAN	Office sought State Representative District 85
		Office held State Representative District 85

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 10/22 Rpt: 19/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/11/2026	5 Payee name AXIOM STRATEGIES	
6 Amount (\$) \$13,872.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name NG, WILLIE	Office sought State Representative District 122
Date 02/11/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$16,182.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ORR, ANGELIA	Office sought State Representative District 13
Date 02/11/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$12,533.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name PETERSON, KELLY	Office sought State Representative District 126

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 11/22 Rpt: 20/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609	
4 Date 02/11/2026	5 Payee name AXIOM STRATEGIES		
6 Amount (\$) \$11,933.00	7 Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112		
<input checked="" type="checkbox"/> Expenditure from corporate funds			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name DEAN, JAY	Office sought State Representative District 7	Office held State Representative District 7
Date 02/11/2026	Payee name AXIOM STRATEGIES		
Amount (\$) \$12,449.00	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112		
<input checked="" type="checkbox"/> Expenditure from corporate funds			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name GERDES, STAN	Office sought State Representative District 17	Office held State Representative District 17
Date 02/11/2026	Payee name AXIOM STRATEGIES		
Amount (\$) \$12,134.00	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112		
<input checked="" type="checkbox"/> Expenditure from corporate funds			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name HARDAWAY, JAY	Office sought State Representative District 71	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 12/22 Rpt: 21/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/11/2026	5 Payee name AXIOM STRATEGIES	
6 Amount (\$) \$14,855.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name KITZMAN, STAN	Office sought State Representative District 85
	Office held State Representative District 85	
Date 02/11/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$13,099.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name ORR, ANGELIA	Office sought State Representative District 13
	Office held State Representative District 13	
Date 02/11/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$12,533.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name PETERSON, KELLY	Office sought State Representative District 126
	Office held State Representative District 126	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 13/22 Rpt: 22/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609			
4 Date 02/17/2026	5 Payee name AXIOM STRATEGIES				
6 Amount (\$) \$14,750.00	7 Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE			
	<table style="width:100%; border: none;"> <tr> <td style="width:20%; border: none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:30%; border: none;">Candidate/Officeholder name DEAN, JAY</td> <td style="width:20%; border: none;">Office sought State Representative District 7</td> <td style="width:30%; border: none;">Office held State Representative District 7</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name DEAN, JAY	Office sought State Representative District 7
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name DEAN, JAY	Office sought State Representative District 7	Office held State Representative District 7		
Date 02/17/2026	Payee name AXIOM STRATEGIES				
Amount (\$) \$12,449.00	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE			
	<table style="width:100%; border: none;"> <tr> <td style="width:20%; border: none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:30%; border: none;">Candidate/Officeholder name GERDES, STAN</td> <td style="width:20%; border: none;">Office sought State Representative District 17</td> <td style="width:30%; border: none;">Office held State Representative District 17</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name GERDES, STAN	Office sought State Representative District 17
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name GERDES, STAN	Office sought State Representative District 17	Office held State Representative District 17		
Date 02/17/2026	Payee name AXIOM STRATEGIES				
Amount (\$) \$12,134.00	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112				
<input checked="" type="checkbox"/> Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE			
	<table style="width:100%; border: none;"> <tr> <td style="width:20%; border: none;">Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td style="width:30%; border: none;">Candidate/Officeholder name HARDAWAY, JAY</td> <td style="width:20%; border: none;">Office sought State Representative District 71</td> <td style="width:30%; border: none;">Office held</td> </tr> </table>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name HARDAWAY, JAY	Office sought State Representative District 71
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name HARDAWAY, JAY	Office sought State Representative District 71	Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 14/22 Rpt: 23/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/17/2026	5 Payee name AXIOM STRATEGIES	
6 Amount (\$) \$14,855.00	7 Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
	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 State Representative District 85	
Date 02/17/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$25,084.00	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held NG, WILLIE State Representative District 122	
Date 02/17/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$16,182.00	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held ORR, ANGELIA State Representative District 13 State Representative District 13	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 15/22 Rpt: 24/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/17/2026	5 Payee name AXIOM STRATEGIES	
6 Amount (\$) \$12,533.00	7 Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name: PETERSON, KELLY Office sought: State Representative District 126 Office held:	
Date 02/18/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$11,933.00	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name: DEAN, JAY Office sought: State Representative District 7 Office held: State Representative District 7	
Date 02/18/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$49,777.33	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name: ORR, ANGELIA Office sought: State Representative District 13 Office held: State Representative District 13	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 16/22 Rpt: 25/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/18/2026	5 Payee name AXIOM STRATEGIES	
6 Amount (\$) \$32,261.41	7 Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name GERDES, STAN	Office sought State Representative District 17
		Office held State Representative District 17
Date 02/18/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$31,255.15	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name HARDAWAY, JAY	Office sought State Representative District 71
		Office held
Date 02/18/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$33,179.00	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name KITZMAN, STAN	Office sought State Representative District 85
		Office held State Representative District 85

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 17/22 Rpt: 26/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/18/2026	5 Payee name AXIOM STRATEGIES	
6 Amount (\$) \$11,212.00	7 Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name: NG, WILLIE Office sought: State Representative District 122 Office held:	
Date 02/18/2026	Payee name AXIOM STRATEGIES	
Amount (\$) \$45,449.67	Payee address; City; State; Zip Code 800 W 47TH ST STE 200 KANSAS CITY, MO 64112	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name: PETERSON, KELLY Office sought: State Representative District 126 Office held:	
Date 02/10/2026	Payee name CHAIN BRIDGE BANK	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 1445-A LAUGHLIN AVE MCLEAN, VA 22101	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BANK FEES
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name: Office sought: Office held:	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 18/22 Rpt: 27/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
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4 Date 02/11/2026	5 Payee name CHAIN BRIDGE BANK
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6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 1445-A LAUGHLIN AVE MCLEAN, VA 22101
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BANK FEES
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/13/2026	Payee name CHAIN BRIDGE BANK
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Amount (\$) \$25.00	Payee address; City; State; Zip Code 1445-A LAUGHLIN AVE MCLEAN, VA 22101
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BANK FEES
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/17/2026	Payee name CHAIN BRIDGE BANK
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Amount (\$) \$75.00	Payee address; City; State; Zip Code 1445-A LAUGHLIN AVE MCLEAN, VA 22101
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BANK FEES
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 19/22 Rpt: 28/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/18/2026	5 Payee name CHAIN BRIDGE BANK	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 1445-A LAUGHLIN AVE MCLEAN, VA 22101	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BANK FEES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2026	Payee name CHAIN BRIDGE BANK	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 1445-A LAUGHLIN AVE MCLEAN, VA 22101	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BANK FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/13/2026	Payee name CONNECTOR INC	
Amount (\$) \$203,017.05	Payee address; City; State; Zip Code 513 CAPITOL CT NE #300 WASHINGTON, DC 20002	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name LEACH, JEFF	Office sought Office held State Representative District 67 State Representative District 67

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 20/22 Rpt: 29/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/20/2026	5 Payee name CONNECTOR INC	
6 Amount (\$) \$89,529.94	7 Payee address; City; State; Zip Code 513 CAPITOL CT NE #300 WASHINGTON, DC 20002	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name: KING, KEN Office sought: State Representative District 88 Office held: State Representative District 88	
Date 02/20/2026	Payee name CONNECTOR INC	
Amount (\$) \$48,135.03	Payee address; City; State; Zip Code 513 CAPITOL CT NE #300 WASHINGTON, DC 20002	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name: MIZANI, ARMIN Office sought: State Representative District 98 Office held:	
Date 02/20/2026	Payee name CONNECTOR INC	
Amount (\$) \$49,247.91	Payee address; City; State; Zip Code 513 CAPITOL CT NE #300 WASHINGTON, DC 20002	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name: MEYER, MORGAN Office sought: State Representative District 108 Office held: State Representative District	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 21/22 Rpt: 30/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
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4 Date 02/20/2026	5 Payee name CONNECTOR INC
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6 Amount (\$) \$103,108.56	7 Payee address; City; State; Zip Code 513 CAPITOL CT NE #300 WASHINGTON, DC 20002
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name LAHOOD, MARC	Office sought State Representative District 121	Office held State Representative District
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Date 02/20/2026	Payee name CONNECTOR INC
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Amount (\$) \$51,253.65	Payee address; City; State; Zip Code 513 CAPITOL CT NE #300 WASHINGTON, DC 20002
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CREATIVE DESIGN SERVICES / PRINTING / POSTAGE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CREATIVE DESIGN SERVICES / PRINTING / POSTAGE
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name PATTERSON, JARED	Office sought State Representative District 106	Office held State Representative District
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Date 02/09/2026	Payee name GUIDANT POLLING & STRATEGY, LLC
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Amount (\$) \$240,000.00	Payee address; City; State; Zip Code PO BOX 1505 BOISE, ID 83701
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) RESEARCH CONSULTING SERVICES	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense RESEARCH CONSULTING SERVICES
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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: 22/22 Rpt: 31/31	2 FILER NAME Texas Conservative Fund	3 Filer ID (Ethics Commission Filers) 00090609
4 Date 02/25/2026	5 Payee name SUMMIT MANAGEMENT AND STRATEGY, LLC	
6 Amount (\$) \$1,993.58	7 Payee address; City; State; Zip Code 5801 LEESBURG PIKE #1036 FALLS CHURCH, VA 22041	
<input checked="" type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COMPLIANCE CONSULTING
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held