

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 2  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Texans ARE</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00654301         </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> /          <div style="border: 1px solid black; padding: 2px;">D D D</div> /          <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: inline-block; text-align: center;"> <div style="border: 1px solid black; padding: 2px;">08</div> /          <div style="border: 1px solid black; padding: 2px;">29</div> /          <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	

Full Name of Payee <b>DROGIN GROUP LLC</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> /          <div style="border: 1px solid black; padding: 2px;">D D D</div> /          <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">08</div> /          <div style="border: 1px solid black; padding: 2px;">27</div> /          <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address <b>7418 MIFFLIN KENEDY TER</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">91230.00</div>	
City <b>AUSTIN</b>	State <b>TX</b>	Zip Code <b>78749</b>	<b>Transaction ID : SE24DG001</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> /          <div style="border: 1px solid black; padding: 2px;">D D D</div> /          <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">08</div> /          <div style="border: 1px solid black; padding: 2px;">23</div> /          <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Purpose of Expenditure <b>PRINTING</b>			Category/Type <div style="border: 1px solid black; padding: 2px;"></div>	
Name of Federal Candidate <b>CRUZ, RAFAEL, TED, ,</b>			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose         </div> <div>           Office Sought: <input type="checkbox"/> House District: <u>00</u>  <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>TX</u> </div> </div>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">95043.09</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶				

Full Name of Payee <b>SHELL OIL</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> /          <div style="border: 1px solid black; padding: 2px;">D D D</div> /          <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">08</div> /          <div style="border: 1px solid black; padding: 2px;">27</div> /          <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Mailing Address <b>910 LOUISIANA ST</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">52.34</div>	
City <b>HOUSTON</b>	State <b>TX</b>	Zip Code <b>77002</b>	<b>Transaction ID : SE24GAS01</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> /          <div style="border: 1px solid black; padding: 2px;">D D D</div> /          <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">08</div> /          <div style="border: 1px solid black; padding: 2px;">24</div> /          <div style="border: 1px solid black; padding: 2px;">2018</div> </div>	
Purpose of Expenditure <b>GASOLINE</b>			Category/Type <div style="border: 1px solid black; padding: 2px;"></div>	
Name of Federal Candidate <b>CRUZ, RAFAEL, TED, ,</b>			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support  <input type="checkbox"/> Oppose         </div> <div>           Office Sought: <input type="checkbox"/> House District: <u>00</u>  <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>TX</u> </div> </div>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">95043.09</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶				

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;">91282.34</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px;"></div>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Langston, Willie, ,

[Electronically Filed]

Date

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Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 2 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Texans ARE</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00654301	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 08 / 29 / 2018	

Full Name of Payee <b>NATIONWIDE TRAILERS</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 27 / 2018	
Mailing Address 16293 INTERSTATE 35 ACCESS RD		Amount 260.75	
City ATASCOSA	State TX	Zip Code 78002	<b>Transaction ID : SE24001</b>
Purpose of Expenditure EQUIPMENT RENTAL	Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 27 / 2018	
Name of Federal Candidate CRUZ, RAFAEL, TED, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
		95043.09	

Full Name of Payee <b>J2 STRATEGIES LLC</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 27 / 2018	
Mailing Address 210 BLACKSTONE COVE		Amount 3500.00	
City DRIFTWOOD	State TX	Zip Code 78619	<b>Transaction ID : SE24J2001</b>
Purpose of Expenditure SHIPPING	Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 29 / 2018	
Name of Federal Candidate CRUZ, RAFAEL, TED, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
		95043.09	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	3760.75
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	95043.09

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Langston, Willie, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
09 / 19 / 2018

Signature