#### FORM CEC COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The CEC Instruction Guide explains how to complete this form. 36 00055130 3 COMMITTEE NAME **OFFICE USE ONLY** Nueces County Republican Executive Committee (CEC) Date Received **ELECTRONICALLY FILED** 07/15/2023 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 5151 Flynn Pkwy Date Hand-delivered or Date Postmarked suite 103 Change of Address Corpus Christi, TX 78411 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. John C. NAME NICKNAME LAST **SUFFIX** Holmgreen Jr. STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 4305 Ocean Drive, Apt. 404 STREET **ADDRESS** (Residence or Business) Corpus Christi, TX 78412 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 5151 Flynn Pkwy MAILING **ADDRESS** Ste. 103 Corpus Christi, TX 78411 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (361) 813-9083 **PHONE** REPORT January 15 30th day before election Final Report **TYPE** 10th day after campaign treasurer 8th day before election July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2023 06/30/2023 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

# COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

# FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Nueces County Republi	can Executive Com	mittee (CEC)	0005513	30
14 COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		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	PLEDGES, LOAN CONTRIBUTIONS	ZED POLITICAL CONTRIBUTIONS (OTHER THAN S, OR GUARANTEES OF LOANS, OR S MADE ELECTRONICALLY) ort qualifies for the higher itemization threshold	\$	0.00
		CAL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	52,205.59
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITION	CAL EXPENDITURES	\$	70,669.58
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT	L CONTRIBUTIONS MAINTAINED AS OF THE LAST ING PERIOD	DAY \$	15,997.44
OUTSTANDING LOAN TOTALS		AL AMOUNT OF ALL OUTSTANDING LOANS AS OF T E REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	<u> </u>		<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.		
		Mr. John C.	Holmaroon	. Tr
		Signature of Ca		
AFFIX NOTARY	STAMP / SEAL ABOV		, 3	
Sworn to and subscribed	before me, by the said	, th	nis the	day
of	_, 20, to certi	fy which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of o	officer administering oath

### **SUBTOTALS - CEC**

### FORM CEC **COVER SHEET PG 3**

					3 of 36
<b>17</b> CC	MMITTE	EE NAME	18 Filer ID	(Eth	ics Commission Filers)
Νι	ieces C	ounty Republican Executive Committee (CEC)	00055130		
		E SUBTOTALS			SUBTOTAL AMOUNT
N/	ME OF	SCHEDULE			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	46,211.01
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	5,994.58
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS	\$		
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	70,669.58
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
10		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/12 Rpt: 4/36	
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)		3	Filer ID (Ethics Commission 00055130	n Filers)
4	Date 04/17/2023	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$20.24
	Dringing agg	Corpus Christi, TX 78401	D. Employer (See Instructions	_		
8	Self Employe		Employer (See Instructions	)		
	Date 05/17/2023	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$20.24
	Principal occu	Corpus Christi, TX 78401 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Self Employe		, . , . (	,		
	Date 06/17/2023	Full name of contributor out-of-state PAC (ID#: Lamb, Susan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.24
		Corpus Christi, TX 78401				
	Principal occu Self Employe	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/10/2023	Full name of contributor out-of-state PAC (ID#:Agan, Barbara  Contributor address; City; State; Zip Code  Corpus Christi, TX 78418	)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 04/13/2023	Full name of contributor out-of-state PAC (ID#:Agan, Barbara  Contributor address; City; State; Zip Code  Corpus Christi, TX 78418			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	()		
		<u>'</u>				

	MONEI	ARY POLITICAL CONTRIBUTI	IONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 2/12 Rpt: 5/36	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Nueces Cou	nty Republican Executive Committee (CEC)			00055130	
4	Date 04/13/2023	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Corpus Christi, TX 78413 pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Ĭ	Retired	salion / oos tille (eee mellastione)	Employer (Geo metractions	٥,		
	Date 06/14/2023	Full name of contributor out-of-state PAC (ID Bergsma, Michael  Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$250.00
		Corpus Christi, TX 78413		<u> </u>		
	Principal occu Bersgma Co	pation / Job title (See Instructions)	Employer (See Instructions Self Employed	S)		
				_		
	Date 06/14/2023	Full name of contributor	#:)		Amount of Contribution (\$)	\$50.00
		Corpus Christi, TX 78414				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired					
	Date 04/14/2023	Full name of contributor out-of-state PAC (ID Bradford, Rebecca  Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$50.00
	Deignaignal	Corpus Christi, TX 78414	Franksian (Cook lastinisticas	<u>-</u>		
	Retired	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 05/14/2023	Full name of contributor out-of-state PAC (ID Bradford, Rebecca  Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$50.00
		Corpus Christi, TX 78414				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/12 Rpt: 6/36	
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)		3	Filer ID (Ethics Commission 00055130	n Filers)
4	Date 06/14/2023	5 Full name of contributor out-of-state PAC (ID#:_ Bradford, Rebecca  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$50.00
_	Deignainal agai	Corpus Christi, TX 78414	O Familia van (Cara la atmesti a a			
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 05/26/2023	Full name of contributor out-of-state PAC (ID#:_ Burnett, Chuck Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$26.34
	Principal occu	Corpus Christi, TX 78411 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/26/2023	Full name of contributor out-of-state PAC (ID#:_ Burnett, Chuck Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$26.34
	Principal occu	Corpus Christi, TX 78411 pation / Job title (See Instructions)	Employer (See Instructions			
	Self Contrac		Employer (See Instructions	<i>,</i>		
	Date 04/04/2023	Full name of contributor out-of-state PAC (ID#:_ Calderone, Carmen Contributor address; City; State; Zip Code Corpus Christi, TX 78414			Amount of Contribution (\$)	\$21.13
	Principal occu Analyzer Te	pation / Job title (See Instructions)	Employer (See Instructions Flint Hills Resources	)		
	Date 05/04/2023	Full name of contributor out-of-state PAC (ID#:_Calderone, Carmen  Contributor address; City; State; Zip Code  Corpus Christi, TX 78414			Amount of Contribution (\$)	\$21.13
	Principal occu Analyzer Te	pation / Job title (See Instructions) chnician	Employer (See Instructions Flint Hills Resources	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	E <b>A1</b>
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 4/12 Rpt: 7/36	
2	FILER NAME	nty Republican Executive Committee (CEC)		3	Filer ID (Ethics Commission 00055130	ı Filers)
4	Date 06/04/2023	Full name of contributor		7	Amount of Contribution (\$)	\$21.13
_	Deinsinal assu	Corpus Christi, TX 78414	O Francisco (Coo Instructions			
8	Analyzer Te	pation / Job title (See Instructions) chnician	9 Employer (See Instructions) Flint Hills Resources	)		
	Date 03/01/2023	Full name of contributor out-of-state PAC (ID#	<u>+:)</u>		Amount of Contribution (\$)	\$20.00
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Analyzer Te	chnician	Flint Hills Resources			
	Date 06/12/2023	Full name of contributor out-of-state PAC (ID# Cross, Kyle Contributor address; City; State; Zip Code	<u>+:)</u>		Amount of Contribution (\$)	\$5.00
		Corpus Christi, TX 78415				
	Principal occu Account Mar	pation / Job title (See Instructions) nager	Employer (See Instructions Moody Price	)		
	Date 03/14/2023	Full name of contributor out-of-state PAC (ID# DeVos, Krystal  Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	<u>;                                    </u>		Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Engineer	,	American Electric Power			
	Date 04/15/2023	Full name of contributor out-of-state PAC (ID# DeVos, Krystal  Contributor address; City; State; Zip Code  Corpus Christi, TX 78410	f:)		Amount of Contribution (\$)	\$25.00
	•	pation / Job title (See Instructions)	Employer (See Instructions			
	Engineer		American Electric Power	r		

	MONEI	ARY POLITICAL CONTRIBUTION	אכ	15		SCHEDULE A1
	The Instruc	ction Guide explains how to complete this t	for	m.	1	Total pages Schedule A1: Sch: 5/12 Rpt: 8/36
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Nueces Cou	nty Republican Executive Committee (CEC)				00055130
4	Date 05/15/2023	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$) \$25.00
_	Dinainal	Corpus Christi, TX 78410	14	Foodbase (October 18)		
8		pation / Job title (See Instructions)	9	Employer (See Instructions		
	Engineer			American Electric Powe	<u> </u>	
	Date 06/15/2023	Full name of contributor		)		Amount of Contribution (\$) \$25.00
		Corpus Christi, TX 78410				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
	Engineer			American Electric Powe	r	
	Date 02/13/2023	Full name of contributor out-of-state PAC (ID#:_Elections Funds Management Team  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$) \$24,000.00
		Austin, TX 78711-2060				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>(</u>	
	Date 05/24/2023	Full name of contributor out-of-state PAC (ID#: Graham, Rita Contributor address; City; State; Zip Code  Corpus Christi, TX 78411		)		Amount of Contribution (\$) \$104.42
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)	
	Date 06/24/2023	Full name of contributor out-of-state PAC (ID#:_Graham, Rita  Contributor address; City; State; Zip Code  Corpus Christi, TX 78411		)		Amount of Contribution (\$) \$104.42
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	5)	

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/12 Rpt: 9/36	
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)		3	Filer ID (Ethics Commission 00055130	n Filers)
4	Date 02/15/2023	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$100.00
0	Dringing aggr	Corpus Christi, TX 78411	• Employer (See Instructions			
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 03/10/2023	Full name of contributor			Amount of Contribution (\$)	\$100.00
	Principal occu	Corpus Christi, TX 78411 pation / Job title (See Instructions)	Employer (See Instructions			
	Retired	oation 7 300 title (See matrictions)	Employer (See instructions	,		
	Date 04/13/2023	Full name of contributor	)		Amount of Contribution (\$)	\$100.00
		Corpus Christi, TX 78411				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/23/2023	Full name of contributor out-of-state PAC (ID#:_Graves, Nancy  Contributor address; City; State; Zip Code  Corpus Christi, TX 78411	)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/19/2023	Full name of contributor out-of-state PAC (ID#:_Graves, Nancy  Contributor address; City; State; Zip Code  Corpus Christi, TX 78411			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)		
		<u>,</u>				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/12 Rpt: 10/36	
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)		3	Filer ID (Ethics Commission 00055130	n Filers)
4	Date 05/19/2023	5 Full name of contributor out-of-state PAC (ID#:_ Graves, Nancy  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$100.00
_		Corpus Christi, TX 78411				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 04/13/2023	Full name of contributor out-of-state PAC (ID#:_ Guggenheim, Suzanne Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$26.34
	Dringing aggr	Corpus Christi, TX 78418	Employer (See Instructions			
	Retired	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/18/2023	Full name of contributor out-of-state PAC (ID#:_ Guggenheim, Suzanne Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$26.34
		Corpus Christi, TX 78418				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/18/2023	Full name of contributor out-of-state PAC (ID#:_ Guggenheim, Suzanne Contributor address; City; State; Zip Code Corpus Christi, TX 78418			Amount of Contribution (\$)	\$26.34
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/14/2023	Full name of contributor out-of-state PAC (ID#:_HALL, GWEN  Contributor address; City; State; Zip Code  CORPUS CHRISTI, TX 78414			Amount of Contribution (\$)	\$250.00
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/12 Rpt: 11/36	
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)		3	Filer ID (Ethics Commission 00055130	n Filers)
4	Date 03/10/2023	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$100.00
_		Corpus Christi, TX 78412				
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 01/13/2023	Full name of contributor out-of-state PAC (ID#:_ Holmgreen Jr., John  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Corpus Christi, TX 78412 pation / Job title (See Instructions)	Employer (See Instructions			
	Retired	odition 7 30b title (See Instructions)	Employer (See instructions	,		
	Date 02/15/2023	Full name of contributor			Amount of Contribution (\$)	\$100.00
		Corpus Christi, TX 78412				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/13/2023	Full name of contributor out-of-state PAC (ID#:_Holmgreen Jr., John  Contributor address; City; State; Zip Code  Corpus Christi, TX 78412			Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 05/19/2023	Full name of contributor out-of-state PAC (ID#:_ Holmgreen Jr., John  Contributor address; City; State; Zip Code  Corpus Christi, TX 78412	)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONEI	ARY POLITICAL CONT	RIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to com	plete this fo	rm.	1	Total pages Schedule A1: Sch: 9/12 Rpt: 12/36	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Nueces Cou	nty Republican Executive Committee (	CEC)			00055130	
4	Date 06/01/2023	5 Full name of contributor out-of-state PAC (ID#:)  /2023 Hunter, Todd			7	Amount of Contribution (\$)	\$15,000.00
		6 Contributor address; City; State; Zip C	ode				
_	D: : 1	Corpus Christi, TX 78418			$\overline{\Gamma}$		
8		pation / Job title (See Instructions) s State Representative	9	Employer (See Instructions Self	5)		
	Lawyen rexa			Seli	_		
	Date	<b>—</b>	state PAC (ID#:	)		Amount of Contribution (\$)	***
	03/14/2023	Locke, Heather					\$20.24
		Contributor address; City; State; Zip C	ode				
		Corpus Christi, TX 78401					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						
	Date	Full name of contributor out-of-	state PAC (ID#:	)		Amount of Contribution (\$)	
	03/14/2023	Locke, Heather					\$50.00
		Contributor address; City; State; Zip C	ode				
		Corpus Christi, TX 78401			Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						
	Date	<b>—</b>	state PAC (ID#:	)		Amount of Contribution (\$)	
	04/15/2023	Locke, Heather					\$50.00
		Contributor address; City; State; Zip C	ode				
		Corpus Christi, TX 78401					
	Princinal occu	pation / Job title (See Instructions)		Employer (See Instructions	:) 		
	Retired	salem, cos line (coe mondellons)		Employer (God meadeache	,		
	Date	Full name of contributor  out-of-	state PAC (ID#:	)	Г	Amount of Contribution (\$)	
	05/15/2023	Locke, Heather	state i AO (ID#	)		γ another of Contribution (φ)	\$50.00
		Contributor address; City; State; Zip C	ode				•
		Continuator address, City, State, Elp C	ouc				
		Corpus Christi, TX 78401					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired						
_			ı				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/12 Rpt: 13/36	
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)		3	Filer ID (Ethics Commission 00055130	n Filers)
4	Date 06/15/2023	<ul> <li>5 Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$50.00
		Corpus Christi, TX 78401				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 02/15/2023	Full name of contributor out-of-state PAC (ID#:_ Magill, Donald Contributor address; City; State; Zip Code  Corpus Christi, TX 78404			Amount of Contribution (\$)	\$100.00
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Business De	<u> </u>	<u> </u>	_	Amount of Contribution (\$)	
	03/13/2023	Full name of contributor out-of-state PAC (ID#:_ Magill, Donald Chad Contributor address; City; State; Zip Code			Amount of Contribution (c)	\$52.37
		Corpus Christi, TX 78404				
	Principal occu Business De	pation / Job title (See Instructions) velopment	Employer (See Instructions	5)		
	Date 04/15/2023	Full name of contributor out-of-state PAC (ID#:_ Magill, Donald Chad  Contributor address; City; State; Zip Code  Corpus Christi, TX 78404			Amount of Contribution (\$)	\$52.37
	Principal occu Business De	pation / Job title (See Instructions) velopment	Employer (See Instructions	5)		
	Date 05/15/2023	Full name of contributor out-of-state PAC (ID#:_Magill, Donald Chad  Contributor address; City; State; Zip Code  Corpus Christi, TX 78404			Amount of Contribution (\$)	\$52.37
	Principal occu Business De	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 11/12 Rpt: 14/36	
2	FILER NAME Nueces Cou	nty Republican Executive Committee (CEC)		3	Filer ID (Ethics Commission 00055130	n Filers)
4	Date 06/15/2023			7	Amount of Contribution (\$)	\$52.37
_	Deignaignal annu	Corpus Christi, TX 78404	O Francisco (Con Instructions			
8	Principal occupation / Job title (See Instructions)  Director of Business Development  9 Employer (See Instruction Buchanan Title		9 Employer (See Instructions Buchanan Title	)		
	Date Full name of contributor out-of-state PAC (ID#:)  05/09/2023 Milby, Laura  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00
	Principal occu	Corpus Christi, TX 78410 pation / Job title (See Instructions)	Employer (See Instructions			
	Retired	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/10/2023	Full name of contributor out-of-state PAC (ID#: Milby, Laura Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		Corpus Christi, TX 78410				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 01/13/2023	Full name of contributor			Amount of Contribution (\$)	\$500.00
Principal occupation / Job title (See Instructions)  Employer (See Instructions)				)		
	Date 03/20/2023	Full name of contributor out-of-state PAC (ID#:_ Stripe Contributor address; City; State; Zip Code San Francisco, CA 94080			Amount of Contribution (\$)	\$186.90
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 12/12 Rpt: 15/36	
2	FILER NAME Nueces Cou	ınty Republican Executive Committee (CEC)		3	Filer ID (Ethics Commission 00055130	ion Filers)
4	Date 01/13/2023  5 Full name of contributor out-of-state PAC (ID#:) Todd A Hunter Campaign  6 Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$3,000.00
8	Principal occu	Corpus Christi, TX 78412  upation / Job title (See Instructions)	9 Employer (See Instructions	<u>s)</u>		
Ů	Principal occu	pation 7 Job title (See Instructions)	9 Employer (See instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 05/08/2023 Whiteside, Jason  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$52.37
		Corpus Christi, TX 78411				
	Principal occu Controls Est	ipation / Job title (See Instructions) imator	Employer (See Instructions Pro Tech Mechanical	s)		
	Date 06/09/2023	Full name of contributor out-of-state PAC (ID#: Whiteside, Jason Contributor address; City; State; Zip Code Corpus Christi, TX 78411	)		Amount of Contribution (\$)	\$52.37
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions Pro Tech Mechanical	s)		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/3 Rpt: 16/36			
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
	ınty Republican Executive Committee (CEC)		00055130		
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		
<b>5</b> Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution		
05/15/2023	Holmgreen, John (Mr.)	,	contribution (\$) description		
	7 Contributor address; City; State; Zip Code		\$454.64   Scan Snap ix1600		
	7 Contributor address, City, State, Zip Code		wireless or USB high- speed cloud enabled		
			idocument, etc., scanner.		
	Corpus Christi, TX 78412				
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	L Check if travel outside of Texas. Complete Schedule TJUDICIAL) (See instructions)		
Retired	pation / Job title (FOR NON-JODICIAL) (See instructions)	11 Employer (FOR NON	-JODICIAL) (See instituctions)		
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)		
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor  uut-of-state PAC (ID#:	)	Amount of In-kind contribution contribution (\$) description		
06/18/2023	Holmgreen, Jr., John (Mr.)		\$17.31 \ 3 Rings Check Binder for		
	Contributor address; City; State; Zip Code		End-Stub Deskbook		
			Checks, 3 on a page, etc.,		
			2, primary election		
	Corpus Christi, TX 78412		Check if travel outside of Texas. Complete Schedule T.		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)		
Retired					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
ii contributori	is a clind, law little of parent(s) (if any) (FOR JODICIAL)				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution		
05/19/2023	Holmgreen, Jr., John (Mr.)		contribution (\$) description		
	Contributor address; City; State; Zip Code		\$54.11   Seagate Portable 1TB ! External Hard Drive HDD -		
	•		USB 3.0, plus 1 year		
			rescue service.		
	Corpus Christi, TX 78412		Check if travel outside of Texas. Complete Schedule T.		
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON			
Retired	,	, s, s, (, s, t, t, s)	- , .		
Contributor's principal occupation (FOR JUDICIAL)  Contributor's job title (FOR JUDICIAL) (See instructions)					
Continuator 5	principal decapation (i ort debioine)	Continuator 3 job title	(. C. COBIONIE) (Coo mondations)		
Contributor's ampleyer/law firm (FOR HIDICIAL)					
Contributor's employer/law firm (FOR JUDICIAL)  Law firm of contributor's spouse (if any) (FOR JUDICIAL)					
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

The Instru	ection Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 2/3 Rpt: 17/36					
2 FILER NAME		3 Filer ID (Ethics Commission Filers)					
	unty Republican Executive Committee (CEC)		00055130				
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$				
<b>5</b> Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution				
05/15/2023	Holmgreen, Jr., John (Mr.)		contribution (\$) description				
	7 Contributor address; City; State; Zip Code		\$60.21   Assurion 3 Year Office   Protection Plan for Fujitsu   iX1600 Scan Snap   Scanner				
	Corpus Christi, TX 78412		Check if travel outside of Texas. Complete Schedule T.				
10 Principal occi Retired	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)				
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)				
	principal occupation (Control 2)	20 Contributor o job title	(( 6)( ( 6)( ) ( ) ( ) ( ) ( ) ( ) ( ) (				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)				
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution				
06/14/2023	Holmgreen Jr., John (Mr.)	/	contribution (\$) description				
	Contributor address; City; State; Zip Code		\$17.31 3 Rings Check Binder for				
	Communication address, City, State, 219 Code		End-Stub Deskbook Checks, 3 on a page, etc., 1250 sheet, 500 check				
	Corpus Christi, TX 78412		Check if travel outside of Texas. Complete Schedule T.				
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON					
Retired							
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)					
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
ii deritiibatoi	is a sima, iair mini or paroni(s) (ii any) (i or coobion ib)						
Date	Full name of contributor  ut-of-state PAC (ID#:	)	Amount of In-kind contribution				
06/08/2023	Magill, Donald		contribution (\$) description \$4,650.00 Website development.				
	Contributor address; City; State; Zip Code		I				
	Corpus Christi, TX 78404		Check if travel outside of Texas. Complete Schedule T.				
Principal occi	Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions)						
Business De	evelopment						
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)				
	East min of containation 3 special (in array) (if the containation 3 spe						
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1					

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

The Instru	iction Guide explains how to complete this f	1 Total pages Schedule A2:				
The msuru	iction Guide explains now to complete this i	Sch: 3/3 Rpt: 18/36				
2 FILER NAME		3 Filer ID (Ethics Commission Filers)				
	unty Republican Executive Committee (CEC)		00055130			
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$			
<b>5</b> Date	6 Full name of contributor  ut-of-state PAC (ID#:	8 Amount of 9 In-kind contribution contribution (\$) description				
04/08/2023	magni, Bonaid		\$179.00   Software development.			
	7 Contributor address; City; State; Zip Code					
			<u> </u>			
	Corpus Christi, TX 78404		Check if travel outside of Texas. Complete Schedule T.			
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON				
Business De	evelopment					
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)			
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•				
Date	Full name of contributor  out-of-state PAC (ID#:	)	Amount of In-kind contribution			
05/08/2023	Magill, Donald		contribution (\$) description \$179.00   Software development.			
	Contributor address; City; State; Zip Code		I			
			į į			
	Corpus Christi, TX 78404		Check if travel outside of Texas. Complete Schedule T.			
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)			
Business De	evelopment					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution			
06/08/2023	Magill, Donald (Mr.)		contribution (\$) description \$383.00   Software development.			
	Contributor address; City; State; Zip Code		\$303.00 I Software development.			
			<u> </u>			
	Corpus Christi, TX 78404		;			
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T.  -JUDICIAL) (See instructions)			
Business Development						
	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1				

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	r - Il Committee	-			ges/Contract Labor	Travel Out of District OTHER (enter a cate	t egory not listed above)
			The Instruction Guid	de explains ho	ow to com	plete this form.		
1	Total pages Schedule F1:	l					,	Ethics Commission Filers)
	Sch: 1/18 Rpt: 19/36		ces County Republican E	Executive Co	ommitte	e (CEC)	00055130	
4	Date	1	e name					
	04/27/2023	Ama	zon.com, Inc					
6	Amount (\$)	<b>7</b> Paye	e address; City;	State;	Zip Cod	e		
	\$119.06	410	Terry Ave N					
		Sea	ttle, WA 98109					
8	PURPOSE	(a) Cate	gory (See Categories listed at the	top of this sched	lule) (	b) Description		
	OF EXPENDITURE		ce Overhead/Rental Expe		, I	Check if travel	outside of Texas. Complete	
	LAFLINDITORE		·			_	n, TX, officeholder living exp	pense
						keyless door	entry lock	
9	Complete ONLY if direct		date/Officeholder name	Off	fice soug	ht	Office held	
	expenditure to benefit C/OI	¬						
	Date	Paye	e name					
	02/27/2023	Bak	er, Barbara					
	Amount (\$)	Paye	e address; City;	State;	Zip Cod	e		
	\$2,697.43	6003	B Lost Creek Dr					
		Corp	ous Christi, TX 78413					
	PURPOSE	(a) Cate	gory (See Categories listed at the	top of this sched	lule) (	b) Description		
	OF EXPENDITURE	Sala	ries/Wages/Contract Lab	oor		<u> </u>	outside of Texas. Complete	
						ш	n, TX, officeholder living exp	ce of the Secretary of
							2 Primary Finance	
_	Computate ONU V If allows	0"	data/Office heal designs are	6"	San 5 1			•
	Complete ONLY if direct expenditure to benefit C/OI		date/Officeholder name	Off	fice soug	iii.	Office held	
<b> </b>	Data							
	Date	1	e name					
	06/26/2023		Institute					
	Amount (\$)	ľ	e address; City;		Zip Cod	e		
	\$25.00	1000	) Massachusetts Ave. N\	N				
		Was	hington, DC 20001					
	PURPOSE	(a) Cate	gory (See Categories listed at the	top of this sched	lule)	b) Description		
	OF EXPENDITURE	Refe	erence material			<u> </u>	outside of Texas. Complete	
	<del></del>					Check if Austin	n, TX, officeholder living exp	pense
						Reference M	ાતાસાત્રા	
	Complete ONLY if divert	Candi	data/Officeholder name	044	fine court	ht	Office hald	
	Complete ONLY if direct expenditure to benefit C/OI		date/Officeholder name	Off	fice soug	III.	Office held	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mittee	Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Expense		xpens Vages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 2/18 Rpt: 20/36		Nueces Cou	nty Republican	Executive (	Committ	ee (	(CEC)		00055130	
4	Date	5	Payee name						•		
	01/10/2023			others Transpor	tation						
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Co	de				
	\$1,970.00		414 Navigat	ion Blvd							
		_	Corpus Chri	sti, TX 78408							
8	PURPOSE OF	(a)	Category <sub>(Se</sub>	e Categories listed at th	ne top of this sche	edule)	(b)	Description			
	EXPENDITURE		Event Exper	ise				<b>=</b>		de of Texas. Comp officeholder living	
								<b>—</b>			t Chairs & others for the
								1st legislative			
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	ceholder name	0	office sou	ght			Office he	eld
	Date	l	Payee name								
	06/29/2023		Donorbox								
	Amount (\$)		Payee addres	s; City;	State;	Zip Co	de				
	\$90.36		1520 Belle \	iew Blvd/							
			#4106								
		.	Alexandria, `	VA 22307							
	PURPOSE	(a)	Category <sub>(Se</sub>	e Categories listed at th	ne top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Fees					<b>□</b>		de of Texas. Com	
								Donorbox pro		officeholder living	
								Polioinox hic	JUE:	saniy uundli	UII ICC3
$\vdash$	Complete ONLY if direct		andidate/Offic	ceholder name		office sou	aht			Office he	ald
L	expenditure to benefit C/O		andidate/Offic	CHOIGE HAITE		c 30U	9111			Onice He	aru -
	Date		Payee name								
	05/31/2023		Harland Cla	rke							
	Amount (\$)		Payee addres	s; City;	State;	Zip Co	de				
	\$107.18		10931 Laure	eate Drive							
			San Antonio	, TX 78249							
	PURPOSE OF			e Categories listed at th	ne top of this sche	edule)	(b)	Description			
	EXPENDITURE	'	Accounting/l	Banking						de of Texas. Comp officeholder living	
								Check order			2
$\vdash$	Complete ONLY if direct		andidate/Offic	ceholder name	0	office sou	ght			Office he	eld
	expenditure to benefit C/O						<b>J</b> -				

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Ļ	<b>-</b>	,
1	Total pages Schedule F1: Sch: 3/18 Rpt: 21/36	2 FILER NAME Nueces County Republican Executive Committee (CEC) 3 Filer ID (Ethics Commission Filers) 00055130
4	Date	5 Payee name
	01/10/2023	Jalisco Mexican Restaurant
6	Amount (\$) \$193.30	7 Payee address; City; State; Zip Code 4001 South Padre Island Drive
L		Corpus Christi, TX 78411
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Breakfast tacos for bus trip to Austin State Capitol
		Broaklast tasss for sas the to riastiff state supitor
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Data	
	Date	Payee name
	01/17/2023	MICROSOFT INC
	Amount (\$)	Payee address; City; State; Zip Code
	\$27.06	1 MICROSOFT WAY
		REDMOND, WA 98052
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	-	Check if Austin, TX, officeholder living expense
		software subscription
_	Complete ONLY if allowed	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/14/2023	MICROSOFT INC
	Amount (\$)	Payee address; City; State; Zip Code
	\$27.06	1 MICROSOFT WAY
		REDMOND, WA 98052
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Software subscription
		Software Subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 4/18 Rpt: 22/36	Nueces County Republican Executive Committee (CEC) 00055130				
4	Date	5 Payee name				
	03/14/2023	MICROSOFT INC				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$27.06	1 MICROSOFT WAY				
		REDMOND, WA 98052				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense software licenses				
		Software ilicenses				
_	Operation ONLY if allowed	On did to 10 ff as hald a grant Off as south				
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
	Date	Payee name				
	04/14/2023	MICROSOFT INC				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$27.06	1 MICROSOFT WAY				
		REDMOND, WA 98052				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense  software licenses				
		Software meetises				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·				
	Date	Payee name				
	05/13/2023	MICROSOFT INC				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$27.06	1 MICROSOFT WAY				
		REDMOND, WA 98052				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Office Overhead/Rental Expense				
	ZA ZADITORZ	Check if Austin, TX, officeholder living expense				
		software licenses				
	0 1. 0					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
L		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 5/18 Rpt: 23/36	2 FILER NAME Nueces County Republican Executive Committee (CEC)  3 Filer ID (Ethics Commission Filers) 00055130
4	·	· · · · · · · · · · · · · · · · · · ·
4	Date	5 Payee name
	05/26/2023	MICROSOFT INC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4.26	1 MICROSOFT WAY
		REDMOND, WA 98052
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		software licenses
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H	Date	Payee name
	06/09/2023	MICROSOFT INC
-	Amount (\$)	Payee address; City; State; Zip Code
	\$6.40	1 MICROSOFT WAY
	Φ0.40	I WICKUSUP I WAT
		REDMOND, WA 98052
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Software licenses
		Sultware licenses
_	Complete ONLY 'C. "	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	,	
	Date	Payee name
	06/13/2023	MICROSOFT INC
	Amount (\$)	Payee address; City; State; Zip Code
	\$32.32	1 MICROSOFT WAY
		REDMOND, WA 98052
$\vdash$	PURPOSE	1
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		software licenses
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Cabadula F1:	
1 Total pages Schedule F1: Sch: 6/18 Rpt: 24/36	2 FILER NAME Nueces County Republican Executive Committee (CEC)  3 Filer ID (Ethics Commission Filers) 00055130
4 Date	5 Payee name
02/13/2023	MURPHY NASICA
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$38,062.65	PO BOX 1648
	AUSTIN, TX 78767
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Digital Creative fee, Ad spend, Get Out the Vote text
	Messages, and Data Fees
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
06/15/2023	OFFICE DEPOT 70 CORPUS CHRIST TX
Amount (\$)	Payee address; City; State; Zip Code
\$50.01	5425 SPID
	CORPUS CHRISTI, TX 78411
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Office supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
05/10/2023	OLGUIN, HILDA (Ms.)
Amount (\$)	Payee address; City; State; Zip Code
\$319.60	2233 PINEHOLLOW LANE
Ψ013.00	LEGO. INCLIGATION DAME
	CORPUS CHRISTI, TX 78418
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
LA LIBITORE	Check if Austin, TX, officeholder living expense
	chk 10206 04/07/23
Complete CAU V & dive - 4	Condidate/Officeholder name Office cought
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
•	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica	
	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/18 Rpt: 25/36	Nueces County Republican Executive Committee (CEC) 00055130
4	Date	5 Payee name
	03/08/2023	OLGUIN, HILDA
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$912.05	2233 PINEHOLLOW LANE
		CORPUS CHRISTI, TX 78418
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		chk 10090
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/08/2023	OLGUIN, HILDA
	Amount (\$)	Payee address; City; State; Zip Code
	\$912.05	2233 PINEHOLLOW LANE
		CORPUS CHRISTI, TX 78418
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  chk no. 10091
		CHATIO. 10001
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/08/2023	OLGUIN, HILDA
	Amount (\$)	Payee address; City; State; Zip Code
	\$876.09	2233 PINEHOLLOW LANE
	φον σ.σσ	2233 TIVETIGEESW ETWE
		CODDUC CUDICTL TV 70410
		CORPUS CHRISTI, TX 78418
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		chk 10092
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Consuling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/18 Rpt: 26/36	Nueces County Republican Executive Committee (CEC) 00055130
4	Date	5 Payee name
	01/03/2023	OOMA INC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$30.34	1880 EMBARCADERO ROAD
		PALO ALTO, CA 94303
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Office telephone system
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Т	Date	Payee name
	02/01/2023	OOMA INC
_	Amount (\$)	Payee address; City; State; Zip Code
	\$30.74	1880 EMBARCADERO ROAD
	Ψ30.74	1000 EMBANCADENO NOAD
		PALO ALTO, CA 94303
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Office telephone system
		Office telephone system
	Operation ONLY if allowed	One distributed Office health
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/06/2023	OOMA INC
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.74	1880 EMBARCADERO ROAD
		PALO ALTO, CA 94303
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Office telephone system
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	∍in/Awards/Memoriais Expense ∟egal Services	Salaries/V	/ages	Contract Labor		OTHER (enter a	category not listed above)	
			The Instruction Guide ex	plains how to co	mple	te this form.				
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission File	ers)
	Sch: 9/18 Rpt: 27/36	Nueces Cou	nty Republican Exec	utive Committ	ee (	CEC)		00055130		
4	Date	5 Payee name								
	04/03/2023	OOMA INC								
6	Amount (\$)	7 Payee addres	s; City;	State; Zip Co	de					
	\$30.74	1880 EMBA	RCADERO ROAD							
		PALO ALTO	, CA 94303							
8	PURPOSE		e Categories listed at the top of	this schedule)	(b)	Description				
	OF		ead/Rental Expense	and derivation			outsi	utside of Texas. Complete Schedule T.		
	EXPENDITURE					Check if Austin,	, TX,	officeholder living	expense	
						Office telepho	one	S		
9	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	1								
	Date	Payee name								
	05/31/2023	OOMA INC								
	Amount (\$)	Payee addres	s; City;	State; Zip Co	de					
	\$30.74	1880 EMBA	RCADERO ROAD							
		PALO ALTO	CV 04303							
	PURPOSE OF		e Categories listed at the top of	this schedule)	(b)	Description		df.T O	olata Cabadula T	
	EXPENDITURE	Office Overh	ead/Rental Expense			<b></b>		officeholder living	plete Schedule T.	
						Office telepho			Гехрепас	
						Office telepric	JI 10			
_	Complete ONLY if direct	Candidate/Offic	oholder name	Office sou	abt			Office he	ald.	
	expenditure to benefit C/OI		enoluei name	Office Sou	gni			Office He	eiu .	
	·									
	Date	Payee name								
	06/01/2023	OOMA INC								
	Amount (\$)	Payee addres	s; City;	State; Zip Co	de					
	\$30.74	1880 EMBA	RCADERO ROAD							
		PALO ALTO	, CA 94303							
	PURPOSE	(a) Category (Sa)	e Categories listed at the top of	this schedule)	(b)	Description				
	OF		ead/Rental Expense	tillo seriedale)	` ,		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	000 0.10	.oc.a,oa. =/.pooo			Check if Austin,	, TX,	officeholder living	expense	
						Telephone sy	/ste	em		
	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI									

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/18 Rpt: 28/36	Nueces County Republican Executive Committee (CEC) 00055130
4	Date	5 Payee name
	01/20/2023	Olguin, Hilda
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$531.79	2233 Pinehollow Lane
		Corpus Christi, TX 78418
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LXI LINDITORE	Check if Austin, TX, officeholder living expense
		payroll ck 10089 12/26-01/08/2023
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/24/2023	Olguin, Hilda
	Amount (\$)	Payee address; City; State; Zip Code
	\$995.23	2233 Pinehollow Lane
	4000.20	
		Corpus Christi, TV 70410
		Corpus Christi, TX 78418
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Payroll ck 10092
		02/06-02/19/23
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/10/2023	Olguin, Hilda
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,038.49	2233 Pinehollow Lane
		Corpus Christi, TX 78418
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Payroll ck 10091 01/23-02/05/23
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	
ı		

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political C

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Printing Expense Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 11/18 Rpt: 29/36 Nueces County Republican Executive Committee (CEC) 00055130 4 Date Payee name 05/10/2023 Olguin, Hilda 6 Amount (\$) Payee address; State; Zip Code \$273.00 2233 Pinehollow Lane Corpus Christi, TX 78418 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Payroll ck 10205 3/6-3/19/23 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/07/2023 Olguin, Hilda Amount (\$) Payee address; City; State; Zip Code \$346.08 2233 Pinehollow Lane Corpus Christi, TX 78418 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Payroll ck 10206 3/20-4/02/23 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/10/2023 Olguin, Hilda Amount (\$) Payee address: City: State; Zip Code \$519.36 2233 Pinehollow Lane Corpus Christi, TX 78418 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Payroll ck 10204 2/20-3/5/23 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 12/18 Rpt: 30/36	2 FILER NAME Nueces County Republican Executive Committee (CEC)  3 Filer ID (Ethics Commission Filers) 00055130
4	Date 06/26/2023	5 Payee name Olguin, Hilda
6	Amount (\$) \$636.05	7 Payee address; City; State; Zip Code 2233 Pinehollow Lane
_		Corpus Christi, TX 78418
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll for month of April
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 06/27/2023	Payee name Olguin, Hilda
	Amount (\$) \$1,070.68	Payee address; City; State; Zip Code 2233 Pinehollow Lane
		Corpus Christi, TX 78418
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Payroll month of May
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date 01/20/2023	Payee name Olguin, Hilda
	Amount (\$) \$1,000.57	Payee address; City; State; Zip Code 2233 Pinehollow Lane
		Corpus Christi, TX 78418
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense chk 10085
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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)

	Credit Card Payment	The Instruction Guide explains how to complete this for	m.		
1	Total pages Schedule F1:	2 FILER NAME	3	Filer ID	(Ethics Commission Filers)
	Sch: 13/18 Rpt: 31/36	Nueces County Republican Executive Committee (CEC)		00055130	
4	Date	5 Payee name	•		
	01/20/2023	Olguin, Hilda			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$1,000.58	2233 Pinehollow Lane			
		Corpus Christi, TX 78418			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descripti	ion		
	OF EXPENDITURE	· · · · · · · · · · · · · · · · · · ·		ide of Texas. Com	plete Schedule T.
	LAFLINDITORL			, officeholder living	expense
		Payroll	ck 1008	4	
_	Operation ONE V if dispert	Occasional (Office Includes a constant		O#: I-	.1.1
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought		Office he	eiu
	Date	Payee name			
	01/20/2023	Olguin, Hilda			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,000.58	2233 Pinehollow Lane			
		Corpus Christi, TX 78418			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	ion		
	OF EXPENDITURE	Salaries/Wages/Cortifact Eabor		ide of Texas. Com , officeholder living	
			ck 1008		Гехрепое
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld
	expenditure to benefit C/O				
	Date	Payee name			
	01/20/2023	Olguin, Hilda			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,000.59	2233 Pinehollow Lane			
	<b>+-</b> ,000.00				
		Corpus Christi, TX 78418			
	DUDDOCE				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Descripti  Check		ide of Texas. Com	plete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Eabor		, officeholder living	
		chk 100	)87		
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld
	expenditure to benefit C/O	1			

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 14/18 Rpt: 32/36	2 FILER NAME Nueces County Republican Executive Committee (CEC) 3 Filer ID (Ethics Commission Filers) 00055130
4	Date	5 Payee name
	01/20/2023	Olguin, Hilda
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$524.80	2233 Pinehollow Lane
		Corpus Christi, TX 78418
		Corpus Cillisti, 17 70410
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
	-	Check if Austin, TX, officeholder living expense
		chk 10088
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>
	Date	Payee name
	03/06/2023	Reich Enterprises, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,796.00	P O Box 81281
		Corpus Christi, TX 78468
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Monthly Rent for Jan, Feb, and March
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	<b>D</b> .	
	Date	Payee name
	05/11/2023	Reich Enterprises, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,864.00	P O Box 81281
		Corpus Christi, TX 78468
<u> </u>	DUDDOS-	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Clock if travel systems of Toyon Complete Schedule T
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		April and May Rent
		April and way item
_	0 1. 0	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L		

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

rsement Solicitation/Fundraising Expense
xpense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
Labor OTHER (enter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_		
1	Total pages Schedule F1: Sch: 15/18 Rpt: 33/36	2 FILER NAME Nueces County Republican Executive Committee (CEC)  3 Filer ID (Ethics Commission Filers) 00055130
4	Date	5 Payee name
	06/05/2023	Reich Enterprises, Inc.
6	Amount (\$) \$1,932.00	7 Payee address; City; State; Zip Code P O Box 81281
		Corpus Christi, TX 78468
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		June Rent
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/17/2023	Spectrum
	Amount (\$)	Payee address; City; State; Zip Code
	\$119.78	4001 Saratoga Blvd
		Corpus Christi, TX 78413
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense monthly internet account
		monthly internet decount
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/16/2023	Spectrum
	Amount (\$)	Payee address; City; State; Zip Code
	\$119.78	4001 Saratoga Blvd
		Corpus Christi, TX 78413
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense monthly internet account
		monthly internet account
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 16/18 Rpt: 34/36	2 FILER NAME Nueces County Republican Executive Committee (CEC) 3 Filer ID (Ethics Commission Filers) 00055130
4	Date	F. Daving same
*		5 Payee name
	03/16/2023	Spectrum
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$125.21	4001 Saratoga Blvd
		Corpus Christi, TX 78413
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		monthly internet
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	04/17/2023	Spectrum
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.21	4001 Saratoga Blvd
		Corpus Christi, TX 78413
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Monthly Internet
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	D :	
	Date	Payee name
	05/14/2023	Spectrum
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.21	4001 Saratoga Blvd
		Corpus Christi, TX 78413
	DUDDOCE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Monthly Internet
		moneny meeting
_	Complete ONLY if direct	Condidate/Officeholder name Office cought
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	·	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/18 Rpt: 35/36	Nueces County Republican Executive Committee (CEC) 00055130
4	Date	5 Payee name
	06/13/2023	Spectrum
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$125.21	4001 Saratoga Blvd
		Corpus Christi, TX 78413
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Monthly Internet
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Oi	
	Date	Payee name
	06/16/2023	Spectrum
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.21	4001 Saratoga Blvd
		Corpus Christi, TX 78413
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Internet, wifi
	2	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/06/2023	Texas Ethics Commission
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	201 E. 14th St.
		No. 10
		Austin , TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Penalties for delinquent filing of semiannual reports
L		July 15th 2022 and
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	<b>1</b>

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - al Co	mmittee	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Expens Printing Expen	ad/Rental Expense se nse es/Contract Labor		Travel in District Travel Out of Di	
	Credit Card Payment			The Instruction Guide explai	ns how to comp	lete this form.			
1	Total pages Schedule F1:	2	FILER NAM	E			3	Filer ID	(Ethics Commission Filers)
	Sch: 18/18 Rpt: 36/36		Nueces Co	unty Republican Executiv	e Committee	(CEC)		00055130	
4	Date	5	Payee name	1			<u> </u>		
	06/01/2023			kforce Commission					
6	Amount (\$)	7	Payee addre		ate; Zip Code				
ľ	\$577.07	ľ	PO Box 88		ate, Zip code				
	Ψ511.01		1 0 000 00	70					
			0	-:-+: TV 70.400					
ᆫ		L		risti, TX 78468					
8	PURPOSE OF	(a)		See Categories listed at the top of this	schedule) (b)	Description			
l	EXPENDITURE		Fees			_		ide of Texas. Con , officeholder living	plete Schedule T.
l						ш			st late payment and late
l						penalty Dec			
9	Complete ONLY if direct	<u> </u>	Candidata/Off	ïceholder name	Office sought			Office h	old
	expenditure to benefit C/O	н `	Sandidate/On	icendider name	Office 30ugni	•		Office II	eiu
$\vdash$									