### COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

# FORM CEC COVER SHEET PG 1

Th	e CEC Instruction G	uide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00035364	2 Total pages filed: 40
3	COMMITTEE NAME		1	OFFICE USE ONLY
	Grayson County R	epublican Party (CEC)		
				07/17/2023
Ļ				0//1//2023
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CIT	Y; STATE; ZIP CODE	
	/ 2011200	P.O. Box 3122		Date Hand-delivered or Date Postmarked
	Change of Address			
		Sherman, TX 75091		Receipt # Amount
				Date Processed
				Date Imaged
-	CAMPAIGN	MS / MRS / MR FIRST		MI
5	TREASURER	Shawn D.		MI
	NAME	Shawir D.		
		NICKNAME LAST		SUFFIX
		Nesmith		
6	CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY;	STATE; ZIP CODE
	STREET	701 Mohawk Drive		
	ADDRESS			
	(Residence or Business)	Tioga, TX 76271		
7	CAMPAIGN	STREET OR PO BOX;	APT / SUITE #; CITY	; STATE; ZIP CODE
	TREASURER MAILING	701 Mohawk Drive		
	ADDRESS			
		Tioga, TX 76271		
	Change of Address			
8	CAMPAIGN TREASURER		EXTENSION	
	PHONE	(972) 251-3058		
L	55505T			
9	REPORT TYPE	January 15 30	Oth day before election	Final Report
		8ti	h day before election	10th day after campaign treasurer
		X July 15	unoff	termination
10	PERIOD	Month Day Year	Month Day	Year
	COVERED	01/01/2023 TH	ROUGH 06/30/202	3
11	ELECTION	ELECTION DATE		
		Month Day Year	Primary Runoff	Other
			General Special	
⊢		II		
		GO 1	TO PAGE 2	
Fo	rms provided by Te	xas Ethics Commission www.et	hics.state.tx.us	Version V3.5.1.a18ea2ca

### COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

### FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME				13 File	r ID	(Ethics Commission Filers)	
Grayson County Repub	lican Party (CEC)			000	35364		
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Republican	·			
(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	S, OR GUARANT	CONTRIBUTIONS (OTHER EES OF LOANS, OR ONICALLY) nigher itemization threshold	THAN	\$	0.00	
	2. TOTAL POLITIC (OTHER THAN P		<b>JTIONS</b> 5, OR GUARANTEES OF LO	DANS)	\$	4,605.00	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ED POLITICAL E	XPENDITURES		\$	0.00	
	4. TOTAL POLITIC	CAL EXPENDIT	URES		\$	7,802.21	
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT		NS MAINTAINED AS OF TH	HE LAST DAY	\$	57,787.93	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPA LAST DAY OF TH		LL OUTSTANDING LOANS ERIOD	S AS OF THE	\$	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.						
					nith		
				Shawn D. Nesr ure of Campaign		er	
			Cignat			-	
	STAMP / SEAL ABOV						
				, this the		day	
of	, 20, to certin	y which, withess	my hand and seal of office.				
Signature of officer ad	ministering oath	Printed name	of officer administering oath	Title	e of office	er administering oath	
Forms provided by Texas E	thics Commission	www.	ethics.state.tx.us			Version V3.5.1.a18ea2ca	

S	UBT	OTALS - CEC	FORM CE	3	
СО	MMITTI	EE NAME	18 Filer ID	(Ethics Commission Filer	s)
Gra	ayson (	County Republican Party (CEC)			
	HEDUL ME OF	SUBTOTAL AMOUN	١T		
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 4,6	05.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 7,8	02.21
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	

**17** COMMITTEE NAME

10.

TO FILER

**19** SCHEDULE SUBTOTALS NAME OF SCHEDULE

SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED

\$

	The Instru	ction Guide explains how to complete this f	orm.		I pages Schedule A1: : 1/24 Rpt: 4/40	
2	FILER NAME				ID (Ethics Commission	ı Filers)
		unty Republican Party (CEC)			35364	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amo	ount of Contribution (\$)	
	02/01/2023	AINSWORTH, JEFF				\$10.00
	I	6 Contributor address; City; State; Zip Code				
		DENISON, TX 75020				
8	Principal occu	I upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> ;)		
	ELECTRICIA		SELF	,		
	Date	Full name of contributor Out-of-state PAC (ID#:	)	Amo	ount of Contribution (\$)	
	02/01/2023	AREND, KARL	/	,		\$20.00
	02,01,2020					Ψ20100
		Contributor address; City; State; Zip Code				
		DENISON, TX 75020				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ן                                    </u>		
	RETIRED	,		,		
	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amo	ount of Contribution (\$)	
	02/01/2023	BAILEY, MIKE	/	7.110		\$10.00
	0210112020	Contributor address; City; State; Zip Code				Ψ10.00
		Continuation address, City, State, Zip Code				
		WHITESBORO, TX 76273				
	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	1 S)		
	MANAGER		CBS			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:	)	Amo	ount of Contribution (\$)	
	02/01/2023	BALNETT, JAMES			•••	\$3.00
	-	Contributor address; City; State; Zip Code				
		DENISON, TX 75020				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	RETIRED					
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amo	ount of Contribution (\$)	
	02/01/2023	BARROW, CHRISTINE				\$20.00
	I	Contributor address; City; State; Zip Code				
	I	TOM BEAN, TX 75489				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	RETIRED					

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 2/24 Rpt: 5/40
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	unty Republican Party (CEC)		00035364
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
02/01/2023	BASS, TODD		\$7.0
	6 Contributor address; City; State; Zip Code		
	DENISON, TX 75020		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)
SIGNMAKEF	२	FASTSIGNS	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/01/2023	BELL, DAVID		\$20.0
	POTTSBORO, TX 75076		
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	;)
TRUCKER		SELF	,
Date	Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/01/2023	BOERERS, TERRY	/	\$20.0
0210112020			φ <b>μ</b> οι.
	Contributor address; City; State; Zip Code		
	VAN ALSTYNE, TX 75995		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	() ;)
RURAL CAR		USPS	,
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)
02/01/2023	Full name of contributor out-of-state PAC (ID#: BOWLING, JOHN	)	Amount of Contribution (\$) \$20.0
02/01/2023			ψ20.
	Contributor address; City; State; Zip Code		
	WHITESBORO, TX 76273		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)
ENGINEER		RAYTHEON	,
Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
02/01/2023	BROWN, ANDREA	/	\$10.0
02,02,2022	Contributor address; City; State; Zip Code		
	Continuator address, City, State, Zip Code		
	LAKE KIOWA, TX 76240		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>
ADOPTIONS		SELF	)
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,		

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 3/24 Rpt: 6/40	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		unty Republican Party (CEC)			00035364	
4	Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7	Amount of Contribution (\$)	
	02/01/2023	BROWN, FELICIA				\$10.00
		6 Contributor address; City; State; Zip Code				
		SHERMAN, TX 75092				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	RETIRED					
	Date	Full name of contributor 🔲 out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	03/11/2023	BROWN, JOE				\$100.00
		Contributor address; City; State; Zip Code				
		SHERMAN, TX 75092				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	ATTORNEY		SELF			
	Date	Full name of contributor out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	02/01/2023	BRUNSTAD, JANE				\$30.00
		Contributor address; City; State; Zip Code				
		SHERMAN, TX 75092	1			
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	RETIRED					
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	02/01/2023	BURKHALTER, STEVE				\$10.00
		Contributor address; City; State; Zip Code		"		
		DENISON, TX 75020	1			
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	NURSE		TMC			
	Date	Full name of contributor 🛛 out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	02/01/2023	CASHDOLLAR, CHRIS				\$20.00
		Contributor address; City; State; Zip Code		"		
		AUBREY, TX 76227				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	RETIRED					

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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/24 Rpt: 7/40	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
-		unty Republican Party (CEC)			00035364	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	03/21/2023	CHAMBERLAIN, GEORGE				\$20.00
	I	6 Contributor address; City; State; Zip Code				
	Drivelassi	DENISON, TX 75020		Ĺ		
8	Principal occu RETIRED	ipation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/01/2023	COLE, CLARENCE				\$10.00
	I	Contributor address; City; State; Zip Code				
	I					
	I	1				
	I	DENISON, TX 75020				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u>ר</u>		
	STAFF		DENISON	9		
				—		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/01/2023	COLE, SHAWN				\$20.00
	I	Contributor address; City; State; Zip Code				
	I	1				
	I	1				
		GORDONVILLE, TX 76245				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
	MARINE SV	C	I			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/17/2023	COWAN, BILL (Mr.)				\$100.00
	•=.=.	Contributor address; City; State; Zip Code				+
	I	Continuouol address, City, State, Zip Code				
	I	1				
	l	SHERMAN, TX 75092-2406				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
	N/A		RETIRED			
	Date	Full name of contributor Out-of-state PAC (ID#:		—	Amount of Contribution (\$)	
	03/03/2023	COWAN, BILL (Mr.)	/			\$100.00
	03/03/2020					Φ100.00
	I	Contributor address; City; State; Zip Code				
	I	1				
	I	CUEDMAN, TV 75000 0400				
		SHERMAN, TX 75092-2406	]			
		upation / Job title (See Instructions)	Employer (See Instructions)	;)		
	N/A	ļ	RETIRED			

SCHEDULE	A1
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In Total pages Schedule A1: Sch: 5/24 Rpt: 8/40         2       FILER NAME Grayson County Republican Party (CEC)       3       Filer ID (Ethics Commission Filer: 00035364         4       Date O4/17/2023       5       Full name of contributor of out-of-state PAC (ID#: 004/17/2023       7       Amount of Contribution (\$)         6       Contributor address; City; State; Zip Code       5       Employer (See Instructions) N/A       9       Employer (See Instructions) RETIRED       Amount of Contribution (\$)         05/17/2023       Full name of contributor out-of-state PAC (ID#: Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$10         05/17/2023       Full name of contributor out-of-state PAC (ID#: Contributions) RETIRED       Amount of Contribution (\$)       \$10         05/17/2023       Full name of contributor out-of-state PAC (ID#: Contribu
Grayson CUTY Republican Party (CEC)       00035364         4       Date       5       Full name of contributor       out-of-state PAC (ID#:)       7       Amount of Contribution (\$)         04/17/2023       COWAN, BILL (Mr.)       COWAN, BILL (Mr.)       \$10         6       Contributor address; City; State; Zip Code       Full name of contributor address; City; State; Zip Code       7       Amount of Contribution (\$)         8       Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)       Amount of Contribution (\$)         N/A       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$10         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$10         05/17/2023       COWAN, BILL (Mr.)       Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$10         N/A       SHERMAN, TX 75092-2406       Employer (See Instructions)       RETIRED       \$10         N/A       SHERMAN, TX 75092-2406       Employer (See Instructions)       Amount of Contribution (\$)       \$10         N/A       SHERMAN, TX 75092-2406       Employer (See Instructions)       Amount of Contribution (\$)       \$10         N/A       COWAN, BILL (Mr.) <td< td=""></td<>
4 Date       5 Full name of contributor       out-of-state PAC (ID#:)       7 Amount of Contribution (\$)         6 Od/17/2023       5 COWAN, BILL (Mr.)       6 Contributor address; City; State; Zip Code       7 Amount of Contribution (\$)         8 Principal occupation / Job title (See Instructions)       9 Employer (See Instructions)       9 Employer (See Instructions)         N/A       Principal occupation / Job title (See Instructions)       9 Employer (See Instructions)       Amount of Contribution (\$)         5 Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         9 Frincipal occupation / Job title (See Instructions)       9 Employer (See Instructions)       Amount of Contribution (\$)         05/17/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         N/A       SHERMAN, TX 75092-2406       SHERMAN, TX 75092-2406       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       RETIRED         N/A       RETIRED       Amount of Contribution (\$)       Stop         06/02/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/02/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$10
04/17/2023       COWAN, BILL (Mr.)       \$10         6       Contributor address; City; State; Zip Code       \$10         8       Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)       RETIRED         04/17/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$10         05/17/2023       COWAN, BILL (Mr.)       COWAN, BILL (Mr.)       Amount of Contribution (\$)       \$10         05/17/2023       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$10         05/17/2023       SHERMAN, TX 75092-2406       Employer (See Instructions)       \$10         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       RETIRED         N/A       RETIRED       Amount of Contribution (\$)       \$10         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$10         06/02/2023       COWAN, BILL (Mr.)       S10       \$10       \$10
6       Contributor address; City; State; Zip Code         SHERMAN, TX 75092-2406       SHERMAN, TX 75092-2406         8       Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)         N/A       Pull name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state; Zip Code       Amount of Contribution (\$)         05/17/2023       COWAN, BILL (Mr.)
6       Contributor address; City; State; Zip Code         SHERMAN, TX 75092-2406       SHERMAN, TX 75092-2406         8       Principal occupation / Job title (See Instructions) N/A       9       Employer (See Instructions) RETIRED         Date       Full name of contributor out-of-state PAC (ID#:) COWAN, BILL (Mr.)       Amount of Contribution (\$)         05/17/2023       COWAN, BILL (Mr.)       Amount of Contribution (\$)         05/17/2024       SHERMAN, TX 75092-2406       Amount of Contributions) SHERMAN, TX 75092-2406         Principal occupation / Job title (See Instructions) N/A       Employer (See Instructions) RETIRED       Amount of Contribution (\$)         Date       Full name of contributor out-of-state PAC (ID#:) Od/02/2023       Amount of Contribution (\$)         Date       Full name of contributor out-of-state PAC (ID#:) COWAN, BILL (Mr.)       Amount of Contribution (\$)
8       Principal occupation / Job title (See Instructions) N/A       9       Employer (See Instructions) RETIRED         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/17/2023       COWAN, BILL (Mr.)       \$10         Contributor address; City; State; Zip Code       SHERMAN, TX 75092-2406       \$10         Principal occupation / Job title (See Instructions) N/A       Employer (See Instructions) RETIRED       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/02/2023       COWAN, BILL (Mr.)       \$10
8       Principal occupation / Job title (See Instructions) N/A       9       Employer (See Instructions) RETIRED         Date       Full name of contributor out-of-state PAC (ID#:) COWAN, BILL (Mr.)       Amount of Contribution (\$)         05/17/2023       COWAN, BILL (Mr.)       \$10         Contributor address; City; State; Zip Code       Amount of Contribution         Principal occupation / Job title (See Instructions) N/A       Employer (See Instructions) RETIRED         Date       Full name of contributor         O6/02/2023       COWAN, BILL (Mr.)
8       Principal occupation / Job title (See Instructions) N/A       9       Employer (See Instructions) RETIRED         Date       Full name of contributor out-of-state PAC (ID#:) COWAN, BILL (Mr.)       Amount of Contribution (\$)         05/17/2023       COWAN, BILL (Mr.)       \$10         Contributor address; City; State; Zip Code       Amount of Contribution         Principal occupation / Job title (See Instructions) N/A       Employer (See Instructions) RETIRED         Date       Full name of contributor         O6/02/2023       COWAN, BILL (Mr.)
N/A     RETIRED       Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)       05/17/2023     COWAN, BILL (Mr.)     \$10       Contributor address; City; State; Zip Code     SHERMAN, TX 75092-2406     \$10       Principal occupation / Job title (See Instructions)     Employer (See Instructions)     \$10       N/A     RETIRED     Amount of Contribution (\$)     \$10       Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)       Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)       06/02/2023     COWAN, BILL (Mr.)     \$10
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/17/2023       COWAN, BILL (Mr.)       \$10         Contributor address; City; State; Zip Code       SHERMAN, TX 75092-2406       \$10         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10         N/A       RETIRED       Amount of Contribution (\$)       \$10         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/02/2023       COWAN, BILL (Mr.)       \$10
05/17/2023       COWAN, BILL (Mr.)       \$10         Contributor address; City; State; Zip Code       \$10         SHERMAN, TX 75092-2406       \$10         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         N/A       RETIRED         Date       Full name of contributor out-of-state PAC (ID#:)         06/02/2023       COWAN, BILL (Mr.)
Contributor address; City; State; Zip Code         SHERMAN, TX 75092-2406         Principal occupation / Job title (See Instructions)         N/A         Employer (See Instructions)         N/A         Date         Full name of contributor         out-of-state PAC (ID#:)         Amount of Contribution (\$)         \$10         06/02/2023
SHERMAN, TX 75092-2406     Employer (See Instructions)       Principal occupation / Job title (See Instructions)     Employer (See Instructions)       N/A     RETIRED       Date     Full name of contributor out-of-state PAC (ID#:)     Amount of Contribution (\$)       06/02/2023     COWAN, BILL (Mr.)     \$10
Principal occupation / Job title (See Instructions)     Employer (See Instructions)       N/A     RETIRED       Date     Full name of contributor out-of-state PAC (ID#:)     Amount of Contribution (\$)       06/02/2023     COWAN, BILL (Mr.)     \$10
Principal occupation / Job title (See Instructions)     Employer (See Instructions)       N/A     RETIRED       Date     Full name of contributor     out-of-state PAC (ID#:)       06/02/2023     COWAN, BILL (Mr.)     \$10
Principal occupation / Job title (See Instructions)     Employer (See Instructions)       N/A     RETIRED       Date     Full name of contributor out-of-state PAC (ID#:)     Amount of Contribution (\$)       06/02/2023     COWAN, BILL (Mr.)     \$10
N/A     RETIRED       Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)       06/02/2023     COWAN, BILL (Mr.)     \$10
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)       06/02/2023     COWAN, BILL (Mr.)     \$10
06/02/2023 COWAN, BILL (Mr.) \$10
SHERMAN, TX 75092-2406
Principal occupation / Job title (See Instructions) Employer (See Instructions)
N/A RETIRED
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)
01/01/2023 COWAN, BILL (Mr.) \$10
Contributor address; City; State; Zip Code
SHERMAN, TX 75092-2406
Principal occupation / Job title (See Instructions) Employer (See Instructions) N/A RETIRED
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)       01/02/2023     COWAN, BILL (Mr.)     \$10
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         01/02/2023       COWAN, BILL (Mr.)       \$10
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         01/02/2023       COWAN, BILL (Mr.)       \$10         Contributor address; City; State; Zip Code       \$10
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         01/02/2023       COWAN, BILL (Mr.)       \$10         Contributor address; City; State; Zip Code       SHERMAN, TX 75092-2406
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         01/02/2023       COWAN, BILL (Mr.)       \$10         Contributor address; City; State; Zip Code       \$10
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         01/02/2023       COWAN, BILL (Mr.)       \$10         Contributor address; City; State; Zip Code       \$10         SHERMAN, TX 75092-2406       Employer (See Instructions)

The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 6/24 Rpt: 9/40
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	ounty Republican Party (CEC)		00035364
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
01/03/2023			\$100.0
	6 Contributor address; City; State; Zip Code		1
	SHERMAN, TX 75092-2406		
Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u></u>
N/A		RETIRED	»/ 
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
02/01/2023	CRIPE, EARL		\$20.0
	Contributor address; City; State; Zip Code		1
	SHERMAN, TX 75090		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
RETIRED			
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
02/01/2023	DANI, JUSTIN		\$10.0
	Contributor address; City; State; Zip Code		1
	DORCHESTER, TX 75459	1	
-	upation / Job title (See Instructions)	Employer (See Instructions	\$)
RETIRED			
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
02/01/2023	DUNN, MIKE		\$20.0
	Contributor address; City; State; Zip Code		]
	SHERMAN, TX 75092		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)
AIRCRAFT	, , , , , , , , , , , , , , , , , , ,	SELF	~
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)
02/01/2023		/	\$10.0
02,02,2022	Contributor address; City; State; Zip Code		
	WHITESBORO, TX 76273		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۶)
MANAGER		FEMA	

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/24 Rpt: 10/40	
2	FILER NAME			_	Filer ID (Ethics Commission	n Filers)
		unty Republican Party (CEC)		1	00035364	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/01/2023	DUTTON, DIANE				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		WHITESBORO, TX 76273				
8	Principal occu		9 Employer (See Instructions	<u> </u>		
	RETIRED					
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
	02/01/2023	EIZENGA, LINDA			• .	\$20.00
				•		
		SHERMAN, TX 75090				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	RETIRED		RETIRED			
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/01/2023	ELLIOTT, LOYCE				\$10.00
		Contributor address; City; State; Zip Code		1		
		WHITESBORO, TX 76273		<u> </u>		
		Ipation / Job title (See Instructions)	Employer (See Instructions	S)		
	HANDYMAN		SELF			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/01/2023	ENDERS, BECKY				\$10.00
		Contributor address; City; State; Zip Code				
		SHERMAN, TX 75090				
$\vdash$	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> د)		
	RETIRED		SISD	5)		
╞	Date	Full name of contributor out-of-state PAC (ID#:		T	Amount of Contribution (\$)	
	03/21/2023	EPPLER, ROGER (Mr.)	/			\$120.00
	00/21/2020	Contributor address; City; State; Zip Code		•		Ψ120.00
		Continuation address, City, State, Zip Code				
		WHITEWRIGHT, TX 75491				
$\vdash$	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u>і</u> S)		
	RETIRED		RETIRED			
$\vdash$		I				

_					
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 8/24 Rpt: 11/40	
2	FILER NAME			3 Filer ID (Ethics Commission File	ers)
		unty Republican Party (CEC)		00035364	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
	02/01/2023	FIELDS, JOHN		4	\$20.00
		6 Contributor address; City; State; Zip Code			
		SHERMAN, TX 75092			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	)	
	RETIRED				
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	05/24/2023	FLANDERS, DEBBIE (Mrs.)		\$5	500.00
		Contributor address; City; State; Zip Code			
		SHERMAN, TX 75092			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions		
	SECRETAR	Y	CENTRAL CHRISTIAN	CHURCH	
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	02/01/2023	FRAHM, JAMES		9	\$10.00
		Contributor address; City; State; Zip Code			
		WHITESBORO, TX 76273			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions		
	RETIRED				
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	03/11/2023	GANT, BARRY		9	\$20.00
		Contributor address; City; State; Zip Code			
		SHERMAN, TX 75092			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)	
	RETIRED		RETIRED		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	02/01/2023	GODSO, KENNETH			\$5.00
		Contributor address; City; State; Zip Code			
		SHERMAN, TX 75092			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions		
	RETIRED				

The Instruc	ction Guide explains how to complete this f	orm.		otal pages Schedule A1: Sch: 9/24 Rpt: 12/40	
2 FILER NAME				iler ID (Ethics Commission	Filers)
	unty Republican Party (CEC)			00035364	T liers,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 A	mount of Contribution (\$)	
03/11/2023	GONZALEZ, YURI				\$40.00
	6 Contributor address; City; State; Zip Code		1		
	SHERMAN, TX 75090				
8 Principal occur	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
INSURANCE	<u>-</u>	FARMERS INSURANCE	E		
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Ι <sub>Δ</sub>	mount of Contribution (\$)	
02/01/2023	GRALEY, JENNIFER	/			\$20.00
02/01/2020			-		Ψ20.00
	Contributor address; City; State; Zip Code				
	POTTSBORO, TX 75076				
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	1 S)		
	OORDINATOR	GRAYSON COUNTY	.,		
			<del>,</del>		
Date	Full name of contributor out-of-state PAC (ID#:	)	A	mount of Contribution (\$)	
03/11/2023	HARDENBURG, MATT				\$60.00
	Contributor address; City; State; Zip Code		]		
	POTTSBORO, TX 75076				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
RANCHER		SELF			
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	ΙΔ	mount of Contribution (\$)	
02/01/2023	HAYES, BILLIE	/			\$5.00
02/01/2023					φ0.00
	Contributor address; City; State; Zip Code				
	WHITESBORO, TX 76273				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
HOMEMAKE		- F - 7 - X	-,		
		<u> </u>	<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#:	)		mount of Contribution (\$)	±10.00
02/01/2023	HAYNES, DARYL		]		\$10.00
	Contributor address; City; State; Zip Code		]		
	ARGYLE, TX 76226				
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	5)		
BEEF JERK	Y	SELF			

-	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 10/24 Rpt: 13/40
2 F	FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
		unty Republican Party (CEC)		00035364
4 [	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
	02/01/2023	HEAD, KEISHA		\$5.00
		6 Contributor address; City; State; Zip Code		
		WHITESBORO, TX 76273		
<b>8</b> F	Principal occu	I pation / Job title (See Instructions)	9 Employer (See Instructions	l 3)
	HOMEMAKE			, 
[	Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
(	02/01/2023	HELM, MATTHEW		\$10.00
	Contributor address; City; State; Zip Code			
		SHERMAN, TX 75092	i	
		pation / Job title (See Instructions)	Employer (See Instructions	3)
L	DOCTOR		US DERMATOLOGY	
	Date		:)	Amount of Contribution (\$)
(	03/11/2023	HENDERSON, AUBREY		\$10.00
	Contributor address; City; State; Zip Code			
		OUTDMANL TV 75000		
┝	Dringing ogg	SHERMAN, TX 75090	Employer (See Instructions	
	Principal occu RETIRED	pation / Job title (See Instructions)	Employer (See Instructions RETIRED	5)
	Date	Full name of contributor Out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
ļ	02/01/2023	HULL, MITCH		\$10.00
		Contributor address; City; State; Zip Code		
		SADLER, TX 76264		
F	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)
F	RETIRED			
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
(	02/01/2023	JOHNSON, DARRELL		\$5.00
		Contributor address; City; State; Zip Code		
		WHITESBORO, TX 76273		
F	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)
F	RETIRED			

The In	struction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 11/24 Rpt: 14/40
2 FILER N	AMF	<b>3</b> Filer ID (Ethics Commission Filers)
	n County Republican Party (CEC)	00035364
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
02/01/2		\$10.00
	6 Contributor address; City; State; Zip Code	
	GUNTER, TX 75058	
8 Principa	l occupation / Job title (See Instructions) 9 Employer (See Instruction	ions)
RETIR	ED	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/01/2	023 JONES, MIKE	\$2.00
	Contributor address; City; State; Zip Code	
	WHITESBORO, TX 76273	
Principa	l occupation / Job title (See Instructions) Employer (See Instruction	ions)
RETIR	ED	
Date	Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/01/2	023 KELLOW, RYAN	\$10.00
	Contributor address; City; State; Zip Code	
	DENISON, TX 75020	
	l occupation / Job title (See Instructions) Employer (See Instructions)	ions)
MECH		·
Date	Full name of contributor       out-of-state PAC (ID#:)	
02/01/2		\$10.00
	Contributor address; City; State; Zip Code	
	AUBREY, TX 76227	
Principa	l occupation / Job title (See Instructions) Employer (See Instructions)	ions)
RETIR		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/01/2		\$10.00
<u> </u>	Contributor address; City; State; Zip Code	
	Contributor address, City, State, Zip Code	
	DENISON, TX 75020	
Principa	l occupation / Job title (See Instructions) Employer (See Instruction	ions)
LOGIS	FICS BI-LO	

The Instru	ction Guide explains how to complete this f	örm.	1 Total pages Schedule A1: Sch: 12/24 Rpt: 15/40
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Grayson Cor	unty Republican Party (CEC)		00035364
4 Date 02/01/2023	5 Full name of contributor out-of-state PAC (ID#: LAPORTE, JOYCE	)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code		
	WHITESBORO, TX 76273		
8 Principal occu RETIRED	upation / Job title (See Instructions)	9 Employer (See Instructions)	)
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
02/01/2023	LAWSON, RHONDA		\$10.00
	COLLINSVILLE, TX 76273		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	)
RETIRED			
Date	Full name of contributor Out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
02/01/2023	LITCHFIELD, BARRY		\$3.00
-	Contributor address; City; State; Zip Code		
Principal occu	WHITESBORO, TX 76273	Employer (See Instructions)	)
RETIRED			·
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/01/2023	LODGE, SCOTT		\$5.00
	Contributor address; City; State; Zip Code		
	SHERMAN, TX 75090		\
HANDYMAN	ıpation / Job title (See Instructions) N	Employer (See Instructions) A OLD SCHOOL	)
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/01/2023	MAJOR, ERIC Contributor address; City; State; Zip Code		\$5.00
	POTTSBORO, TX 75076		1
	upation / Job title (See Instructions)	Employer (See Instructions)	)
SECURITY		WILSON-JONES	

The Ins	truction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 13/24 Rpt: 16/40	
2 FILER N	AMF		3 Filer ID (Ethics Commission Fi	lers)
	County Republican Party (CEC)		00035364	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
02/01/20	-			\$10.00
	6 Contributor address; City; State; Zip Code			
	DENISON, TX 75020			
8 Principal	occupation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> ;)	
RETIRE				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
02/01/20				\$20.00
	Contributor address; City; State; Zip Code			
	WHITESBORO, TX 76273	i		
	occupation / Job title (See Instructions)	Employer (See Instructions	3)	
BOOKK	EEPER	SELF		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
02/01/20	23 MILLER, PAT			\$10.00
	Contributor address; City; State; Zip Code			
	DENISON, TX 75020			
Principal RETIRE	occupation / Job title (See Instructions) D	Employer (See Instructions	·)	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
02/01/2				\$20.00
	Contributor address; City; State; Zip Code			
	COLLINSVILLE, TX 76233	•		
	occupation / Job title (See Instructions)	Employer (See Instructions	3)	
RETIRE	D			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
02/01/20	MUNSON, SUSIE			\$10.00
	Contributor address; City; State; Zip Code			
	DENISON, TX 75020	•		
-	occupation / Job title (See Instructions)	Employer (See Instructions	s)	
RETIRE	D			

The Instrue	ction Guide explains how to complete this f	örm.	1 Total pages Schedule A1: Sch: 14/24 Rpt: 17/40
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Grayson Cou	unty Republican Party (CEC)		00035364
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
02/01/2023	NEAL, LESLIE		\$20.0
	6 Contributor address; City; State; Zip Code		
	WHITESBORO, TX 76273		
-	ipation / Job title (See Instructions)	9 Employer (See Instructions)	)
LENDING AS	SSIST	1ST ST BANK	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/11/2023	NICODEMUS, TONY		\$5.0
	Contributor address; City; State; Zip Code		
	LUELLA, TX 75090		
	upation / Job title (See Instructions)	Employer (See Instructions)	)
FARMER		SELF	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/01/2023	NIX, LINDA		\$20.0
	Contributor address; City; State; Zip Code		
	DENISON, TX 75020		
·	upation / Job title (See Instructions)	Employer (See Instructions)	)
RETIRED			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/01/2023	PAIGE, DAVID		\$5.0
	Contributor address; City; State; Zip Code		
	SHERMAN, TX 75092		
	upation / Job title (See Instructions)	Employer (See Instructions)	)
PLANT MGF	<u>۲</u>	WOLFFAYET	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/01/2023	PARKER, BETTY		\$10.0
	Contributor address; City; State; Zip Code		
	SHERMAN, TX 75092		
	ipation / Job title (See Instructions)	Employer (See Instructions)	)
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 15/24 Rpt: 18/40	
2	FILER NAME			3	Filer ID (Ethics Commission	) Filers)
[		unty Republican Party (CEC)		ľ	00035364	T noroj
4	Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7	Amount of Contribution (\$)	
	02/01/2023	PARRISH, VICTORIA				\$10.00
		6 Contributor address; City; State; Zip Code				
		POTTSBORO, TX 75076				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	RETIRED					
F	Date	Full name of contributor out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	01/17/2023	PHILLIPS, ROBIN				\$20.00
		Contributor address; City; State; Zip Code				
		SHERMAN, TX 75090				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	REALTOR		PARAGON REALTORS	5		
⊨	Date	Full name of contributor out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	02/17/2023	PHILLIPS, ROBIN				\$20.00
		Contributor address; City; State; Zip Code				
		SHERMAN, TX 75090				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	REALTOR		PARAGON REALTORS	5		
	Date	Full name of contributor out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	03/17/2023	PHILLIPS, ROBIN				\$20.00
		Contributor address; City; State; Zip Code		1		
		SHERMAN, TX 75090				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	REALTOR		PARAGON REALTORS	5		
F	Date	Full name of contributor out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	
	04/17/2023	PHILLIPS, ROBIN				\$20.00
		Contributor address; City; State; Zip Code		1		
		SHERMAN, TX 75090				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	REALTOR		PARAGON REALTORS	;		
			•			

SCHEDULE	A1
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The Instruc	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 16/24 Rpt: 19/40
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	unty Republican Party (CEC)		00035364
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
05/17/2023	PHILLIPS, ROBIN		\$20.00
	6 Contributor address; City; State; Zip Code		1
	SHERMAN, TX 75090		
	pation / Job title (See Instructions)	9 Employer (See Instructions	
REALTOR		PARAGON REALTORS	
Date		)	Amount of Contribution (\$)
06/17/2023			\$20.00
	Contributor address; City; State; Zip Code		
	SHERMAN, TX 75090		
Princinal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
REALTOR		PARAGON REALTORS	
			Amount of Contribution (\$)
Date 02/01/2023	PURCELL, TYE	)	4mount of Contribution (\$) \$20.00
02/01/2020	Contributor address; City; State; Zip Code		↓
	Continuator address, City, State, Zip Code		
	BELLS, TX 75414		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
ELECTRICIA	٨N	RENEWABLE	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
02/01/2023	RASMUSSEN, WAYNE		\$10.00
	Contributor address; City; State; Zip Code		
	SHERMAN, TX 75092		
	pation / Job title (See Instructions)	Employer (See Instructions	5)
RETIRED		RETIRED	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
03/21/2023	REDWINE, THOMAS		\$100.00
	Contributor address; City; State; Zip Code		
	DENISON, TX 75020		
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u></u>
ATTORNEY		SELF	>)

The Instru	uction Guide explains how to complete this fe	orm.	1 Total pages Schedule A1: Sch: 17/24 Rpt: 20/40	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission	Filers)
	– ounty Republican Party (CEC)		00035364	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
01/17/2023				\$100.00
	6 Contributor address; City; State; Zip Code			
	SHERMAN, TX 75092			
8 Principal occ HOMEMAK		9 Employer (See Instructions)	)	
			Amount of Contribution (¢)	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	¢100.00
02/17/2023				\$100.00
	Contributor address; City; State; Zip Code			
	SHERMAN, TX 75092			
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions	)	
HOMEMAK			,	
Date	Full name of contributor Out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
03/17/2023				\$100.00
	Contributor address; City; State; Zip Code			
	SHERMAN, TX 75092			
	cupation / Job title (See Instructions)	Employer (See Instructions)	)	
HOMEMAK	čer			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
04/17/2023	RICHARDS, DIANA			\$100.00
	Contributor address; City; State; Zip Code			
	SHERMAN, TX 75092			
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions)	۱	
HOMEMAK			)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/17/2023		/		\$100.00
00.2	Contributor address; City; State; Zip Code			<b>4100</b>
	Contributor address, Oity, State, Ep Soue			
	SHERMAN, TX 75092			
Principal occ	supation / Job title (See Instructions)	Employer (See Instructions)	)	
HOMEMAK	(ER			

The	e Instru	ction Guide explains how to complete this	form.		Total pages Schedule A1: Sch: 18/24 Rpt: 21/40	
2 FILE	R NAME			_	Filer ID (Ethics Commission	n Filers)
		unty Republican Party (CEC)		1	00035364	
4 Date	9	5 Full name of contributor out-of-state PAC (ID#	:)	7	Amount of Contribution (\$)	
06/1	17/2023	RICHARDS, DIANA				\$100.00
		6 Contributor address; City; State; Zip Code		1		
		SHERMAN, TX 75092				
8 Princ	cipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
HON	MEMAKE	R				
Date	9	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
02/0	01/2023	ROESLER, THOMAS				\$5.00
		Contributor address; City; State; Zip Code		1		
		DENISON, TX 75020				
Princ	cipal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
RET	FIRED					
Date	è	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
01/2	23/2023	SHAW, MIKE (Mr.)				\$75.00
		Contributor address; City; State; Zip Code		1		
		DENISON, TX 75020	1	<u> </u>		
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
REI	ΓIRED		N/A			
Date		Full name of contributor out-of-state PAC (ID#	)		Amount of Contribution (\$)	
02/2	23/2023	SHAW, MIKE (Mr.)				\$75.00
		Contributor address; City; State; Zip Code				
		DENISON, TX 75020				
Princ	cinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>د</u>		
	CIPAI OCCU FIRED		N/A	3)		
				<del></del>	Amount of Contribution (ft)	
Date	e 23/2023	Full name of contributor out-of-state PAC (ID# SHAW, MIKE (Mr.)	:)		Amount of Contribution (\$)	\$75.00
0012	2312023			-		Φ10.00
		Contributor address; City; State; Zip Code				
		DENISON, TX 75020				
Princ	cipal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	TIRED		N/A	-,		

The Instru	uction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 19/24 Rpt: 22/40	
2 FILER NAM			3 Filer ID (Ethics Commission	Filers)
	ounty Republican Party (CEC)		00035364	- 1010,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
04/23/2023				\$75.00
	6 Contributor address; City; State; Zip Code			
	DENISON, TX 75020			
	cupation / Job title (See Instructions)	9 Employer (See Instructions	s)	_
RETIRED		N/A		
Date	Full name of contributor out-of-state PAC (ID#:	· )	Amount of Contribution (\$)	
05/23/2023				\$75.00
	DENISON, TX 75020			
Principal occ	L	Employer (See Instructions	<u> </u>	
RETIRED		N/A	-)	
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
02/01/2023		)		\$10.00
02/01/2023	·			ΦT0.00
	Contributor address; City; State; Zip Code			
= : :t	WHITESBORO, TX 76273		<u> </u>	
-	cupation / Job title (See Instructions)	Employer (See Instructions	S)	
RETIRED				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	_
01/22/2023	- ,			\$20.00
	Contributor address; City; State; Zip Code			
	DENISON, TX 75021			
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions	s)	
PRESIDEN	IT/HR PAYROLL	EAGLE EMPLOYER SV	VS LLC	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
02/22/2023				\$20.00
	Contributor address; City; State; Zip Code			
	DENISON, TX 75021			
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions	e)	
-	IT/HR PAYROLL	EAGLE EMPLOYER S		
FRESIDE			V3 LLC	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 20/24 Rpt: 23/40	
2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	inty Republican Party (CEC)		00035364	T nore;
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
03/22/2023	SMITH, LINWOOD			\$20.00
ľ	6 Contributor address; City; State; Zip Code			
	DENISON, TX 75021			
	pation / Job title (See Instructions)	9 Employer (See Instructions		
PRESIDENT/	/HR PAYROLL	EAGLE EMPLOYER SV	VS LLC	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
04/23/2023	SMITH, LINWOOD			\$20.00
ľ	Contributor address; City; State; Zip Code			
	DENISON, TX 75021			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)	
PRESIDENT/	/HR PAYROLL	EAGLE EMPLOYER SV	VS LLC	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
01/02/2023	SMITH, MICHAEL			\$20.00
ľ	Contributor address; City; State; Zip Code			
	-			
	DENISON, TX 75021			
	pation / Job title (See Instructions)	Employer (See Instructions	s)	
HUMAN RES	;OURCES	EAGLE EMPLOYER SV	VS LLC	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
02/02/2023	SMITH, MICHAEL			\$20.00
ľ	Contributor address; City; State; Zip Code			
	-			
	DENISON, TX 75021			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)	
HUMAN RES	JOURCES	EAGLE EMPLOYER SV	VS LLC	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
03/02/2023	SMITH, MICHAEL			\$20.00
ľ	Contributor address; City; State; Zip Code	•		
	-			
	DENISON, TX 75021			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)	
HUMAN RES	JOURCES	EAGLE EMPLOYER SV	VS LLC	
				1

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 21/24 Rpt: 24/40	
2 FILER NAME Grayson Cou	inty Republican Party (CEC)		3 Filer ID (Ethics Commission File 00035364	ers)
04/02/2023	5 Full name of contributor Out-of-state PAC (ID#:		7 Amount of Contribution (\$)	\$20.00
	6 Contributor address; City; State; Zip Code			
	DENISON, TX 75021	<u> </u>		
8 Principal occup HUMAN RES	pation / Job title (See Instructions) SOURCES	9 Employer (See Instructions EAGLE EMPLOYER SV		
Date	—	)	Amount of Contribution (\$)	
05/02/2023	SMITH, MICHAEL		5	\$20.00
	Contributor address; City; State; Zip Code DENISON, TX 75021			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	\$)	
HUMAN RES	OURCES	EAGLE EMPLOYER SV	/S LLC	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
02/01/2023	SMITH, THESA			\$20.00
	Contributor address; City; State; Zip Code CENTERVILLE, TX 75835			
	pation / Job title (See Instructions)	Employer (See Instructions	)	
SOCIAL WOR	RKER	TDHS		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
02/01/2023	STAGGS, BRENDA			\$20.00
	Contributor address; City; State; Zip Code			
	COLLINSVILLE, TX 76233	-		
Principal occup TELLER	pation / Job title (See Instructions)	Employer (See Instructions	;;)	
Date 01/02/2023	Full name of contributor          Out-of-state PAC (ID#:_         STAPLES, RICK	)	Amount of Contribution (\$)	100.00
	Contributor address; City; State; Zip Code			
	TIOGA, TX 76271			
	pation / Job title (See Instructions)	Employer (See Instructions		
DIRECTOR	OF TECHNOLOGY	RGT WEALTH ADVISO	'RS	

SCHEDULE	A1
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			1				
The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 22/24 Rpt: 25/40				
2 FILER NAME		<b>3</b> Filer ID (Ethics Commission	Filers)				
	unty Republican Party (CEC)		00035364				
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)				
02/02/2023	STAPLES, RICK			\$100.00			
	6 Contributor address; City; State; Zip Code		1				
	TIOGA, TX 76271						
	upation / Job title (See Instructions)	9 Employer (See Instructions					
DIRECTOR	OF TECHNOLOGY	RGT WEALTH ADVISO	DRS				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)				
03/02/2023	STAPLES, RICK			\$100.00			
	Contributor address; City; State; Zip Code		1				
I	TIOGA, TX 76271						
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)				
DIRECTOR	OF TECHNOLOGY	RGT WEALTH ADVISO	RS				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)				
04/02/2023	STAPLES, RICK			\$100.00			
	Contributor address; City; State; Zip Code						
	TIOGA, TX 76271						
	ipation / Job title (See Instructions)	Employer (See Instructions					
DIRECTOR	OF TECHNOLOGY	RGT WEALTH ADVISO	IRS				
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)				
05/02/2023	STAPLES, RICK			\$100.00			
	Contributor address; City; State; Zip Code						
	TIOGA, TX 76271						
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)				
DIRECTOR	OF TECHNOLOGY	RGT WEALTH ADVISO	NRS				
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)				
06/02/2023	STAPLES, RICK			\$100.00			
	Contributor address; City; State; Zip Code						
	TIOGA, TX 76271						
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)				
DIRECTOR	OF TECHNOLOGY	RGT WEALTH ADVISO	)RS				

The Instru	ction Guide explains how to complete this f	orm.		Total pages Schedule A1: Sch: 23/24 Rpt: 26/40	
2 FILER NAME				Filer ID (Ethics Commission	Filers)
Grayson Co	unty Republican Party (CEC)	(	00035364		
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 /	Amount of Contribution (\$)	
03/11/2023	STREET, JANE				\$30.00
	6 Contributor address; City; State; Zip Code		1		
	SHERMAN, TX 75092				
	upation / Job title (See Instructions)	9 Employer (See Instructions	3)		
RETIRED		RETIRED			
Date	Full name of contributor out-of-state PAC (ID#:	)	<b></b>	Amount of Contribution (\$)	
02/01/2023	TATE, KEWINNA				\$20.00
	Contributor address; City; State; Zip Code		]		
	DENISON, TX 75020				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>د)</u>		
RETIRED			<i>&gt;)</i>		
Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
02/01/2023	TRAWICK, THOMAS	/	<i>'</i>		\$10.00
	Contributor address; City; State; Zip Code		-		Ψ±0.00
	WHITESBORO, TX 76273				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
RETIRED					
Date	Full name of contributor out-of-state PAC (ID#:	)	/	Amount of Contribution (\$)	
02/01/2023	WELCH, SHARRON				\$30.00
	Contributor address; City; State; Zip Code		1		
Principal occu	WHITESBORO, TX 76273 upation / Job title (See Instructions)	Employer (See Instructions			
RETIRED		RETIRED	<i>&gt;)</i>		
Date	Full name of contributor out-of-state PAC (ID#:	)	4	Amount of Contribution (\$)	
04/23/2023	WELCH, WILLIAM				\$20.00
	Contributor address; City; State; Zip Code		1		
Duin single easy	WHITESBORO, TX 76273		Ĺ		
-	upation / Job title (See Instructions) CONTRACTOR	Employer (See Instructions)	5)		
GENERAL		SELF			

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 24/24 Rpt: 27/40
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Grayson County Republican Party (CEC)	00035364
4 Date 5 Full name of contributor out-of-state PAC (ID#:	) 7 Amount of Contribution (\$)
05/23/2023 WELCH, WILLIAM	\$20.00
6 Contributor address; City; State; Zip Code	
WHITESBORO, TX 76273	
	(See Instructions)
GENERAL CONTRACTOR SELF	
Date Full name of contributor out-of-state PAC (ID#:	) Amount of Contribution (\$)
03/11/2023 WILLIS, JOE	\$20.00
Contributor address; City; State; Zip Code	
SHERMAN, TX 75090	
Principal occupation / Job title (See Instructions) Employer	(See Instructions)
RETIRED RETIRE	D
Date Full name of contributor out-of-state PAC (ID#:	) Amount of Contribution (\$)
02/01/2023 WILSON, CARYN	\$20.00
Contributor address; City; State; Zip Code	
COLLINSVILLE, TX 76233	
Principal occupation / Job title (See Instructions) Employer	(See Instructions)
RETIRED	
Date Full name of contributor out-of-state PAC (ID#:	) Amount of Contribution (\$)
02/01/2023 WOOLSEY, DEWAYNE	\$20.00
Contributor address; City; State; Zip Code	
WHITESBORO, TX 76273	
Principal occupation / Job title (See Instructions) Employer	(See Instructions)
FIREFIGHTER WHITES	BORO
Date Full name of contributor out-of-state PAC (ID#:	) Amount of Contribution (\$)
02/01/2023 ZERINGUE, MADELINE	\$20.00
Contributor address; City; State; Zip Code	
DENISON, TX 75020	
Principal occupation / Job title (See Instructions) Employer	(See Instructions)
MARKETING TETON	RIDGE

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expens Gift/Awards/Memorials ittee Legal Services	Loan Rep Office Ove e Polling Ex Expense Printing Ex	yment/Reimbursement rhead/Rental Expense ense pense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:		• • • • • • • • • • • • • • • • • • • •	• • • • • •	<b>3</b> Filer ID (Ethics Commission Filers)				
-	Sch: 1/13 Rpt: 28/40	rayson County Republicar	n Party (CEC)		00035364				
4	Date 02/21/2023	ayee name LEXANDER, STACEY							
6	Amount (\$) \$191.55 7 Payee address; City; State; Zip Code 2088 OLD SOUTHMAYD ROAD SHERMAN, TX 75092								
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Event Expense       (b) Description         Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense CHRISTMAS PARADE									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	ndidate/Officeholder name	Office sou	ght	Office held				
	Date	ayee name							
01/17/2023 FLANDERS, DEBBIE									
	Amount (\$)Payee address;City;State;Zip Code\$348.131603 IDLEWOOD DR.								
		HERMAN, TX 75092							
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at th vent Expense	te top of this schedule)	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense IIGHT PARTY				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sou	yht	Office held				
	Date	ayee name							
	01/13/2023	UMROAD, INC.							
	Amount (\$) \$9.00	ayee address; City; 48 MARKET STREET #41	State; Zip Co 309	de					
		AN FRANCISCO, CA 941	04						
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at th	e top of this schedule)		outside of Texas. Complete Schedule T. , TX, officeholder living expense CE FEES				
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	ndidate/Officeholder name	Office sou	ght	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage ExpensePolling ExpenseTravel in DistrictGift/Awards/Memorials ExpensePrinting ExpenseTravel Out of District					quipment & Related Expense		
1	otal pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission									(Ethics Commission Filers)
	Sch: 2/13 Rpt: 29/40		Grayson County Republican Party (CEC) 00035364							
4	Date	5	Payee name							
	01/27/2023		GUMROAD	, INC.						
6	Amount (\$) \$9.00	7 Payee address;       City;       State; Zip Code         \$9.00       548 MARKET STREET #41309         SAN FRANCISCO, CA 94104								
8	PURPOSE	(a)	Category (Se	e Categories listed at the to	op of this sche	edule)	b) Description			
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	0	Office souç	ht		Office he	ld
	Date		Payee name							
	02/03/2023		GUMROAD	, INC.						
	Amount (\$) \$7.25									
	PURPOSE OF EXPENDITURE	(a)		CISCO, CA 94104	op of this sche	edule)		ı, TX	ide of Texas. Comp , officeholder living FEES	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	0	Office soug	ht		Office he	ld
	Date		Payee name							
	02/10/2023		GUMROAD	, INC.						
	Amount (\$) \$9.00		Payee addres 548 MARKE	ss; City; ET STREET #4130		Zip Coo	le			
			SAN FRAN	CISCO, CA 94104						
	PURPOSE OF EXPENDITURE	(a)	Category <sub>(Se</sub> Fees	e Categories listed at the to	op of this sche	edule)		ı, TX	ide of Texas. Comp , officeholder living FEES	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	0	Office sou	ht		Office he	ld

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Ever Fees Food Gift/ nmittee Lega	Event Expense     Loan Repayment/Reimbursement     Solicitation/Fundra       Fees     Office Overhead/Rental Expense     Transportation Eq       Food/Beverage Expense     Polling Expense     Trave in District       Gift/Awards/Memorials Expense     Printing Expense     Travel out of District       Legal Services     Salaries/Wages/Contract Labor     OTHER (enter a contract						
1	Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commissi									
	Sch: 3/13 Rpt: 30/40		Grayson County Republican Party (CEC)							
4	Date	5	Payee name							
	02/24/2023		GUMROAD, IN	C.						
6	Amount (\$) \$9.00	7       Payee address;       City;       State;       Zip Code         \$9.00       548 MARKET STREET #41309         SAN FRANCISCO, CA 94104								
8	PURPOSE	(a)	Category (See Ca	tegories listed at the top of	this schedule)	(b) Description				
	OF EXPENDITURE		Fees		· · · · · · ,	Check if trave	in, TX	side of Texas. Complete Schedule T. K, officeholder living expense FEES		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeh	older name	Office sou	ught		Office held		
	Date		Payee name							
	03/03/2023 GUMROAD, INC.									
	Amount (\$)		Payee address;	City;	State; Zip C	Code				
	\$7.25	(a)	SAN FRANCIS			(b) Description				
	OF		Fees	tegories listed at the top of	this schedule)	Check if trave	in, TX	side of Texas. Complete Schedule T. K, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeh	older name	Office sou	ught		Office held		
	Date		Payee name							
	03/10/2023		GUMROAD, IN	С.						
	Amount (\$) \$9.00		Payee address; 548 MARKET \$	City; STREET #41309	State; Zip Co	Code				
			SAN FRANCIS	CO, CA 94104						
	PURPOSE OF EXPENDITURE	(a)	Category <sub>(See Ca</sub> Fees	tegories listed at the top of	this schedule)		in, TX	side of Texas. Complete Schedule T. K, officeholder living expense FEES		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeh	older name	Office sou	ught		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - ป Co	Event Expense Fees Food/Beverage Gift/Awards/Me nmittee Legal Services	ss Office Overhead/Rental Expense Trans od/Beverage Expense Polling Expense Trave Awards/Memorials Expense Printing Expense Trave		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	ule F1: 2 FILER NAME 3 Filer ID (Ethics Commission File							
	Sch: 4/13 Rpt: 31/40		Grayson County Repu	ublican Party (CE	.C)			00035364	
4	Date	5	Payee name						
	03/24/2023		GUMROAD, INC.						
6	Amount (\$)	7	Payee address; City	; State;	; Zip Coo	le			
	\$9.00		548 MARKET STREE	T #41309					
			SAN FRANCISCO, C	A 94104					
8	PURPOSE	(a)	Category (See Categories li	isted at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Fees		cuale,	Check if travel		de of Texas. Complete Schedule T.	
	EAPENDITURE							officeholder living expense	
						E-COMMER	CE	FEES	
		L			<u> </u>	-			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder na	.me U	Office soug	jht		Office held	
	Date	Γ	Payee name						
	03/31/2023 GUMROAD, INC.								
	Amount (\$)	$\vdash$	Payee address; City	; State;	; Zip Coo	le			
	\$7.25 548 MARKET STREET #41309								
		L	SAN FRANCISCO, CA		r				
	PURPOSE OF	(a)	Category (See Categories line	sted at the top of this sche	edule)	(b) Description	outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE		Fees					officeholder living expense	
						E-COMMER	CE	FEES	
_	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder na	ıme C	Office soug	Jht		Office held	
	Date	$\square$	Payee name						
	04/14/2023		GUMROAD, INC.						
	Amount (\$)	$\vdash$	Payee address; City		; Zip Coo	1p			
	\$9.00		548 MARKET STREE						
	<b>40100</b>			1 1 1 1 1 0 0 0					
			SAN FRANCISCO, C	A 94104					
	PURPOSE OF	(a)	Category (See Categories lis	isted at the top of this sche	edule)	(b) Description			
	EXPENDITURE		Fees					de of Texas. Complete Schedule T.	
								officeholder living expense	
						E COMMERC	0		
	Complete ONLY if direct	Ļ	Candidate/Officeholder na	ame C	Office soug	iht		Office held	
	expenditure to benefit C/OF				mee soug	jin		onice field	
		—							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	mmittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services	ees     Office Overhead/Rental Expense     1       ood/Beverage Expense     Polling Expense     1       sift/Awards/Memorials Expense     Printing Expense     1			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 5/13 Rpt: 32/40		Grayson C	ounty Republican I	Party (CE	EC)			00035364	
4	Date	5	Payee name	9						
	04/28/2023		GUMROA	D, INC.						
6	Amount (\$) \$9.00	7 Payee address;       City;       State;       Zip Code         548 MARKET STREET #41309         SAN FRANCISCO, CA 94104								
8	PURPOSE	(a)	Category (s	See Categories listed at the	top of this sch	aodulo)	(b) Description			
-	OF EXPENDITURE		Fees	see Calegones insteu at the	up of this sch		Check if travel	, TX,	ide of Texas. Comple , officeholder living e FEES	
9	9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							d		
	Date		Payee name	9						
	05/05/2023		GUMROAD	D, INC.						
	Amount (\$) \$10.13									
			SAN FRAN	ICISCO, CA 94104	1					
	PURPOSE OF EXPENDITURE	(a)	Category (s Fees	See Categories listed at the	top of this sch	nedule)		I, TX	ide of Texas. Compl , officeholder living e FEES	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Of	ficeholder name	(	Office sou	ht		Office hel	d
	Date		Payee name	)						
	05/12/2023		GUMROA							
	Amount (\$) \$9.00		Payee addre 548 MARK	ess; City; ET STREET #413		; Zip Coo	le			
			SAN FRAN	ICISCO, CA 94104	1					
	PURPOSE OF EXPENDITURE	(a)	Category (s Fees	See Categories listed at the	top of this sch	nedule)		, TX	ide of Texas. Compl , officeholder living e FEES	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Of	ficeholder name	(	Office souç	ht		Office held	d

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Commit Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense - Gift/Awards/Memorials Expense Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME	E				3	Filer ID (Ethics Commission Filers)	
	Sch: 6/13 Rpt: 33/40		Grayson County Republican Party (CEC) 00035364							
4	Date	5	Payee name							
	05/26/2023		GUMROAD	), INC.						
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Coo	le			
	\$9.00		548 MARK	ET STREET #4130	09					
			SAN FRAN	CISCO, CA 94104	Ļ					
8	PURPOSE	(a)	Category (S	ee Categories listed at the t	top of this sch	nedule)	(b) Description			
	OF EXPENDITURE		Fees						side of Texas. Complete Schedule T.	
									c, officeholder living expense	
							E-COMMER		FEES	
٩	Complete ONLY if direct			iceholder name		Office soug	uht		Office held	
5	expenditure to benefit C/OI		candidate/On				jint		Onice neid	
	Date		Payee name							
	06/02/2023		GUMROAD							
_	Amount (\$)		Payee addre		State	; Zip Coo	10			
	\$8.43			ET STREET #4130		, zip cot				
	ψ0.40				55					
			SAN FRAN	CISCO, CA 94104	Ļ					
	PURPOSE	(a)	Category (S	ee Categories listed at the t	top of this sch	nedule)	(b) Description			
	OF EXPENDITURE		Fees						side of Texas. Complete Schedule T.	
	_/								c, officeholder living expense	
							E-COMMER	CE	FEES	
	Complete ONLY if direct		Candidato/Off	iceholder name		Office soug	uht		Office held	
	expenditure to benefit C/OI		candidate/On				jint		Onice neid	
	Date		Payee name							
	06/09/2023		GUMROAD							
-	Amount (\$)		Payee addre	ss; City;	State	; Zip Coo	le			
	\$7.30			ET STREET #4130		· •				
			SAN FRAN	CISCO, CA 94104	Ļ					
	PURPOSE	(a)	Category (S	ee Categories listed at the t	top of this sch	nedule)	(b) Description			
	OF EXPENDITURE		Fees						ide of Texas. Complete Schedule T.	
									c, officeholder living expense	
							E-COMMER	υE	FEES	
						- 11				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	C	Office soug	Jht		Office held	
		•								

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	B Filer ID (Ethics Commission Filers)						
-	Sch: 7/13 Rpt: 34/40	Grayson County Republican Party (CEC) 00035364							
4	Date	Payee name							
	06/30/2023	GUMROAD, INC.							
6	Amount (\$) \$9.00	Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104							
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description							
-	OF EXPENDITURE	OF Check if travel outside of Texas. Complete Schedule T.							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	05/22/2023	IRON CREEK STORAGE							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$55.58	8724 FM1417 SHERMAN, TX 75090							
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. TX, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	05/30/2023	IRON CREEK STORAGE							
	Amount (\$) \$41.26	Payee address; City; State; Zip Code 8724 FM1417							
		SHERMAN, TX 75090							
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. TX, officeholder living expense ENTAL						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	ment/Reimbursement head/Rental Expense ense jense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 8/13 Rpt: 35/40		Grayson County Republican Party (CE	C)			00035364		
4	Date	5	Payee name						
	06/05/2023		IRON CREEK STORAGE						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le				
	\$163.00		8724 FM1417						
			SHERMAN, TX 75090						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Office Overhead/Rental Expense				de of Texas. Complete Schedule T.		
							officeholder living expense		
					010101021				
9	Complete ONLY if direct		Candidate/Officeholder name O	)ffice sou	ht		Office held		
-	expenditure to benefit C/OI								
	Date		Payee name						
	01/01/2023		LOS HERMANOS PARTNERSHIP						
	Amount (\$)		Payee address; City; State;	Zip Co	le				
	\$1,170.00		427 N Rusk Suite B	·					
			SHERMAN, TX 75090						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Office Overhead/Rental Expense	,			de of Texas. Complete Schedule T.		
							officeholder living expense RS RENT AND UTILITIES		
					TIEADQUAR		AS KENT AND OTHER ES		
	Complete ONLY if direct		Candidate/Officeholder name O	Office sout	ht		Office held		
	expenditure to benefit C/OI								
	Date		Payee name						
	02/01/2023		LOS HERMANOS PARTNERSHIP						
	Amount (\$)		Payee address; City; State;	Zip Co	le				
	\$1,170.00		427 N Rusk Suite B						
			SHERMAN, TX 75090						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Office Overhead/Rental Expense	,			de of Texas. Complete Schedule T.		
					ΠΕΑυγυακ	IE	RS RENT AND UTILITIES		
	Complete ONLY if direct		Candidate/Officeholder name O	Office sou	ht		Office held		
	expenditure to benefit C/Oł				n n.				
-									

			EXPENDITURE CATEGOR	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Travel in District Travel Out of Distr	uipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID	(Ethics Commission Filers)
	Sch: 9/13 Rpt: 36/40		Grayson County Republican Party (CE	C)			00035364	
4	Date	5	Payee name					
	03/04/2023		LOS HERMANOS PARTNERSHIP					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le			
	\$1,170.00		427 N Rusk Suite B					
			SHERMAN, TX 75090					
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	odulo)	(b) Description			
-	OF		Office Overhead/Rental Expense	edule)		outsid	de of Texas. Comple	ete Schedule T.
	EXPENDITURE				Check if Austin	, TX,	officeholder living e	expense
					HEADQUAR	TEF	RS RENT AN	D UTILITIES
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Jht		Office held	d
	Date		Payee name					
	04/01/2023		LOS HERMANOS PARTNERSHIP					
	Amount (\$)		Payee address; City; State;	Zip Co	le			
	\$1,170.00		427 N Rusk Suite B					
			SHERMAN, TX 75090					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Office Overhead/Rental Expense	ŕ			de of Texas. Compl	
							officeholder living e	
					HEADQUAR	IEF	RENT AN	DUTILITIES
	Complete ONLY if direct		Candidate/Officeholder name C	Office sour	uht		Office held	d
	expenditure to benefit C/OI				jin		Office field	u
_	Date		Payee name					
	05/01/2023		LOS HERMANOS PARTNERSHIP					
_	Amount (\$)		Payee address; City; State;	Zip Co	le			
	\$1,170.00		427 N Rusk Suite B	p 00				
	+=,=: 0:00							
			SHERMAN, TX 75090					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	EXPENDITURE		Office Overhead/Rental Expense				de of Texas. Comple officeholder living e	
					HEADQUAR			
						1		
-	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	Iht		Office held	d
	expenditure to benefit C/OI	H						

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide expla	Office Ov Polling Ex Printing E Salaries/V	erhea kpense xpens Nages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	· · · · ·				3	Filer ID (Ethics Commission Filers)
-	Sch: 10/13 Rpt: 37/40							
4	Date	5	Payee name					
	01/17/2023		MCCOY, ROBIN (Ms.)					
6	Amount (\$)	7	Payee address; City; S	tate; Zip Co	ode			
	\$285.21		746 OLD HWY					
			HOWE, TX 75459					
8	PURPOSE	(a)	Category (See Categories listed at the top of th	in anthe dula)	(b)	Description		
-	OF		Event Expense	is scriedule)			outsi	de of Texas. Complete Schedule T.
	EXPENDITURE							officeholder living expense
						ELECTION N	llGl	HT PARTY
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	03/21/2023		MCCOY, ROBIN (Ms.)					
	Amount (\$)		Payee address; City; S	tate; Zip Co	ode			
	\$50.62		746 OLD HWY					
			HOWE, TX 75459					
	PURPOSE OF		Category (See Categories listed at the top of th	is schedule)	(b)	Description		
	EXPENDITURE		Event Expense					de of Texas. Complete Schedule T. officeholder living expense
						BOOTH REN		
	Complete ONLY if direct	<u>с</u>	andidate/Officeholder name	Office sou	l Jght			Office held
	expenditure to benefit C/OI	Н			0			
	Date		Payee name					
	01/09/2023		RELIANT ENERGY					
-	Amount (\$)		Payee address; City; S	tate; Zip Co	ode			
	\$26.56		PO BOX 650475	uno, <u>-</u> p or				
			DALLAS, TX 75265-0475					
	PURPOSE	(a)	Category (See Categories listed at the top of th	is schedule)	(b)	Description		
	OF EXPENDITURE		Office Overhead/Rental Expense					de of Texas. Complete Schedule T.
						TEADQUAR	101	RS RENT AND UTILITIES
_	Complete ONLV if direct	Ļ	andidate/Officeholder name	Office sou				Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			Unice sol	iynt			Onice neid
_								

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	<b>3</b> Filer ID (Ethics Commission Filers)						
-	Sch: 11/13 Rpt: 38/40	Grayson County Republican Party (CEC)	00035364						
4	Date	Payee name							
_	02/09/2023	RELIANT ENERGY							
6	Amount (\$) \$34.06	Payee address; City; State; Zip Code PO BOX 650475 DALLAS, TX 75265-0475							
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         HEADQUARTERS RENT AND UTILITIES								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	03/13/2023	RELIANT ENERGY							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$43.43	PO BOX 650475 DALLAS, TX 75265-0475							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense 'ERS RENT AND UTILITIES						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	04/12/2023	RELIANT ENERGY							
	Amount (\$) \$48.92	Payee address;City;State;Zip CodePO BOX 650475							
		DALLAS, TX 75265-0475							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense 'ERS RENT AND UTILITIES						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense       Legal Services     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)						
1	Total pages Schedule F1:		<b>3</b> Filer ID (Ethics Commission Filers)						
-	Sch: 12/13 Rpt: 39/40	Grayson County Republican Party (CEC)	00035364						
4	Date	Payee name							
	05/12/2023	RELIANT ENERGY							
6	Amount (\$) \$68.52	Payee address; City; State; Zip Code PO BOX 650475 DALLAS, TX 75265-0475							
	BUBBAAF								
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ERS RENT AND UTILITIES						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	06/12/2023	RELIANT ENERGY							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$54.11	PO BOX 650475 DALLAS, TX 75265-0475							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense 'ERS RENT AND UTILITIES						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	06/21/2023	RELIANT ENERGY							
	Amount (\$) \$69.75	Payee address; City; State; Zip Code PO BOX 650475							
		DALLAS, TX 75265-0475							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense 'ERS RENT AND UTILITIES						
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held						

			EXPENDITURE (						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimburgerse Office Overhead/Rental E Foed/Beverage Expense Polling Expense By - Gift/Awards/Memorials Expense Printing Expense			ment/Reimbursement head/Rental Expense ense jense ages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 13/13 Rpt: 40/40		county Republican F	Party (CEC	C)			00035364	. , ,
4	Date	5 Payee nam	۹				<u> </u>		
	01/17/2023		RE, CHRISTINE						
6	Amount (\$) \$233.80	7 Payee addr 2834 ELLI	-	State;	Zip Coo	le			
		SHERMAI	N, TX 75092						
8	PURPOSE OF EXPENDITURE	(a) Category ( Event Exp	See Categories listed at the to	op of this sched	dule)		, TX,	de of Texas. Com , officeholder living HT PARTY	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Of	fice sou	ht		Office he	eld
	Date	Payee nam	9						
	03/21/2023	,	RE, CHRISTINE						
	Amount (\$) \$91.10	Payee addr 2834 ELLI SHERMAI		State;	Zip Coo	le			
	PURPOSE OF EXPENDITURE	(a) Category ( Event Exp	See Categories listed at the teen see Categories listed at the teen see and the teen see and the second sec	op of this sched	dule)		, TX,	de of Texas. Com , officeholder living DAY PARAE	expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ficeholder name	Of	fice souç	ht		Office he	eld