

COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

FORM CEC
COVER SHEET PG 1

The CEC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00035364	2 Total pages filed: 40
3 COMMITTEE NAME Grayson County Republican Party (CEC)		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/17/2023	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 3122 Sherman, TX 75091		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
		Shawn D.	
	NICKNAME	LAST	SUFFIX
		Nesmith	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 701 Mohawk Drive Tioga, TX 76271		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 701 Mohawk Drive Tioga, TX 76271		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(972)	251-3058	
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Final Report <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 01/01/2023 06/30/2023		
11 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special

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COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM **CEC**
COVER SHEET PG 2

12 COMMITTEE NAME Grayson County Republican Party (CEC)	13 Filer ID (Ethics Commission Filers) 00035364
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Republican
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,605.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,802.21
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 57,787.93
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Shawn D. Nesmith

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - CEC**FORM CEC**
COVER SHEET PG 3
3 of 40

17 COMMITTEE NAME Grayson County Republican Party (CEC)		18 Filer ID 00035364	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	4,605.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	7,802.21
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
10.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/24 Rpt: 4/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 02/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AINSWORTH, JEFF	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code DENISON, TX 75020		
8 Principal occupation / Job title (See Instructions) ELECTRICIAN		9 Employer (See Instructions) SELF
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AREND, KARL	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code DENISON, TX 75020		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BAILEY, MIKE	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code WHITESBORO, TX 76273		
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) CBS
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BALNETT, JAMES	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code DENISON, TX 75020		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BARROW, CHRISTINE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code TOM BEAN, TX 75489		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/24 Rpt: 5/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 02/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BASS, TODD	7 Amount of Contribution (\$) \$7.00
6 Contributor address; City; State; Zip Code DENISON, TX 75020		
8 Principal occupation / Job title (See Instructions) SIGNMAKER		9 Employer (See Instructions) FASTSIGNS
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BELL, DAVID	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code POTTSBORO, TX 75076		
Principal occupation / Job title (See Instructions) TRUCKER		Employer (See Instructions) SELF
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOERERS, TERRY	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code VAN ALSTYNE, TX 75995		
Principal occupation / Job title (See Instructions) RURAL CARRIER		Employer (See Instructions) USPS
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOWLING, JOHN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code WHITESBORO, TX 76273		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions) RAYTHEON
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, ANDREA	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code LAKE KIOWA, TX 76240		
Principal occupation / Job title (See Instructions) ADOPTIONS		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/24 Rpt: 7/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 03/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAMBERLAIN, GEORGE <hr/> 6 Contributor address; City; State; Zip Code DENISON, TX 75020	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, CLARENCE <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) STAFF		Employer (See Instructions) DENISON
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLE, SHAWN <hr/> Contributor address; City; State; Zip Code GORDONVILLE, TX 76245	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) MARINE SVC		Employer (See Instructions)
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN, BILL (Mr.) <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092-2406	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) RETIRED
Date 03/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN, BILL (Mr.) <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092-2406	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/24 Rpt: 8/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 04/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN, BILL (Mr.) <hr/> 6 Contributor address; City; State; Zip Code SHERMAN, TX 75092-2406	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) RETIRED
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN, BILL (Mr.) <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092-2406	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) RETIRED
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN, BILL (Mr.) <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092-2406	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) RETIRED
Date 01/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN, BILL (Mr.) <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092-2406	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) RETIRED
Date 01/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN, BILL (Mr.) <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092-2406	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/24 Rpt: 9/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COWAN, BILL (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code SHERMAN, TX 75092-2406	
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) RETIRED
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CRIPE, EARL	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code SHERMAN, TX 75090	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DANI, JUSTIN	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code DORCHESTER, TX 75459	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, MIKE	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code SHERMAN, TX 75092	
Principal occupation / Job title (See Instructions) AIRCRAFT		Employer (See Instructions) SELF
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUTTON, DARRIN	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code WHITESBORO, TX 76273	
Principal occupation / Job title (See Instructions) MANAGER		Employer (See Instructions) FEMA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/24 Rpt: 10/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 02/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUTTON, DIANE <hr/> 6 Contributor address; City; State; Zip Code WHITESBORO, TX 76273	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EIZENGA, LINDA <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75090	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ELLIOTT, LOYCE <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HANDYMAN		Employer (See Instructions) SELF
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENDERS, BECKY <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75090	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) SISD
Date 03/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) EPPLER, ROGER (Mr.) <hr/> Contributor address; City; State; Zip Code WHITEWRIGHT, TX 75491	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/24 Rpt: 11/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 02/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIELDS, JOHN <hr/> 6 Contributor address; City; State; Zip Code SHERMAN, TX 75092	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 05/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLANDERS, DEBBIE (Mrs.) <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) SECRETARY		Employer (See Instructions) CENTRAL CHRISTIAN CHURCH
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRAHM, JAMES <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 03/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GANT, BARRY <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GODSO, KENNETH <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/24 Rpt: 12/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 03/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONZALEZ, YURI <hr/> 6 Contributor address; City; State; Zip Code SHERMAN, TX 75090	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) INSURANCE		9 Employer (See Instructions) FARMERS INSURANCE
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRALEY, JENNIFER <hr/> Contributor address; City; State; Zip Code POTTSBORO, TX 75076	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) FINANCE COORDINATOR		Employer (See Instructions) GRAYSON COUNTY
Date 03/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HARDENBURG, MATT <hr/> Contributor address; City; State; Zip Code POTTSBORO, TX 75076	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) RANCHER		Employer (See Instructions) SELF
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYES, BILLIE <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYNES, DARYL <hr/> Contributor address; City; State; Zip Code ARGYLE, TX 76226	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) BEEF JERKY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/24 Rpt: 13/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 02/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HEAD, KEISHA <hr/> 6 Contributor address; City; State; Zip Code WHITESBORO, TX 76273	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) HOMEMAKER		9 Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELM, MATTHEW <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DOCTOR		Employer (See Instructions) US DERMATOLOGY
Date 03/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HENDERSON, AUBREY <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75090	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HULL, MITCH <hr/> Contributor address; City; State; Zip Code SADLER, TX 76264	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, DARRELL <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/24 Rpt: 14/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 02/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, DAVID <hr/> 6 Contributor address; City; State; Zip Code GUNTER, TX 75058	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, MIKE <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KELLOW, RYAN <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MECHANIC		Employer (See Instructions) HIAB
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KISSEE, ANITA <hr/> Contributor address; City; State; Zip Code AUBREY, TX 76227	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KYLON, HARVEY <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LOGISTICS		Employer (See Instructions) BI-LO

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/24 Rpt: 16/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 02/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTIN, RODNEY <hr/> 6 Contributor address; City; State; Zip Code DENISON, TX 75020	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCLENDON, SHARON <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) BOOKKEEPER		Employer (See Instructions) SELF
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILLER, PAT <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORDECAI, JOHN <hr/> Contributor address; City; State; Zip Code COLLINSVILLE, TX 76233	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MUNSON, SUSIE <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/24 Rpt: 17/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 02/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NEAL, LESLIE <hr/> 6 Contributor address; City; State; Zip Code WHITESBORO, TX 76273	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) LENDING ASSIST		9 Employer (See Instructions) 1ST ST BANK
Date 03/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICODEMUS, TONY <hr/> Contributor address; City; State; Zip Code LUELLA, TX 75090	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) FARMER		Employer (See Instructions) SELF
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIX, LINDA <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAIGE, DAVID <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) PLANT MGR		Employer (See Instructions) WOLFFAYET
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARKER, BETTY <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) LOGISTICS		Employer (See Instructions) STAT OVER

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/24 Rpt: 18/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 02/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PARRISH, VICTORIA	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code POTTSBORO, TX 75076		
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions)
Date 01/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, ROBIN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SHERMAN, TX 75090		
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) PARAGON REALTORS
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, ROBIN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SHERMAN, TX 75090		
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) PARAGON REALTORS
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, ROBIN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SHERMAN, TX 75090		
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) PARAGON REALTORS
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, ROBIN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SHERMAN, TX 75090		
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) PARAGON REALTORS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/24 Rpt: 19/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 05/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, ROBIN <hr/> 6 Contributor address; City; State; Zip Code SHERMAN, TX 75090	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) REALTOR		9 Employer (See Instructions) PARAGON REALTORS
Date 06/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PHILLIPS, ROBIN <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75090	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) PARAGON REALTORS
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PURCELL, TYE <hr/> Contributor address; City; State; Zip Code BELLS, TX 75414	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) ELECTRICIAN		Employer (See Instructions) RENEWABLE
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RASMUSSEN, WAYNE <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 03/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REDWINE, THOMAS <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) ATTORNEY		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/24 Rpt: 20/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, DIANA <hr/> 6 Contributor address; City; State; Zip Code SHERMAN, TX 75092	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) HOMEMAKER		9 Employer (See Instructions)
Date 02/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, DIANA <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions)
Date 03/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, DIANA <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions)
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, DIANA <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions)
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, DIANA <hr/> Contributor address; City; State; Zip Code SHERMAN, TX 75092	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HOMEMAKER		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/24 Rpt: 21/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 06/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RICHARDS, DIANA	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code SHERMAN, TX 75092		
8 Principal occupation / Job title (See Instructions) HOMEMAKER		9 Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROESLER, THOMAS	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DENISON, TX 75020		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 01/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, MIKE (Mr.)	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code DENISON, TX 75020		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) N/A
Date 02/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, MIKE (Mr.)	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code DENISON, TX 75020		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) N/A
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, MIKE (Mr.)	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code DENISON, TX 75020		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/24 Rpt: 22/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 04/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, MIKE (Mr.)	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code DENISON, TX 75020	
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) N/A
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAW, MIKE (Mr.)	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code DENISON, TX 75020	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) N/A
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLAVIK, ROBERT	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code WHITESBORO, TX 76273	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 01/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, LINWOOD	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code DENISON, TX 75021	
Principal occupation / Job title (See Instructions) PRESIDENT/HR PAYROLL		Employer (See Instructions) EAGLE EMPLOYER SVS LLC
Date 02/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, LINWOOD	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code DENISON, TX 75021	
Principal occupation / Job title (See Instructions) PRESIDENT/HR PAYROLL		Employer (See Instructions) EAGLE EMPLOYER SVS LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/24 Rpt: 23/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 03/22/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, LINWOOD	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code DENISON, TX 75021	
8 Principal occupation / Job title (See Instructions) PRESIDENT/HR PAYROLL		9 Employer (See Instructions) EAGLE EMPLOYER SVS LLC
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, LINWOOD	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code DENISON, TX 75021	
Principal occupation / Job title (See Instructions) PRESIDENT/HR PAYROLL		Employer (See Instructions) EAGLE EMPLOYER SVS LLC
Date 01/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MICHAEL	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code DENISON, TX 75021	
Principal occupation / Job title (See Instructions) HUMAN RESOURCES		Employer (See Instructions) EAGLE EMPLOYER SVS LLC
Date 02/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MICHAEL	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code DENISON, TX 75021	
Principal occupation / Job title (See Instructions) HUMAN RESOURCES		Employer (See Instructions) EAGLE EMPLOYER SVS LLC
Date 03/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MICHAEL	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code DENISON, TX 75021	
Principal occupation / Job title (See Instructions) HUMAN RESOURCES		Employer (See Instructions) EAGLE EMPLOYER SVS LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/24 Rpt: 24/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 04/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MICHAEL	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code DENISON, TX 75021	
8 Principal occupation / Job title (See Instructions) HUMAN RESOURCES		9 Employer (See Instructions) EAGLE EMPLOYER SVS LLC
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, MICHAEL	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code DENISON, TX 75021	
Principal occupation / Job title (See Instructions) HUMAN RESOURCES		Employer (See Instructions) EAGLE EMPLOYER SVS LLC
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, THESA	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code CENTERVILLE, TX 75835	
Principal occupation / Job title (See Instructions) SOCIAL WORKER		Employer (See Instructions) TDHS
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAGGS, BRENDA	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code COLLINSVILLE, TX 76233	
Principal occupation / Job title (See Instructions) TELLER		Employer (See Instructions) CREDIT UNION
Date 01/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAPLES, RICK	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code TIOGA, TX 76271	
Principal occupation / Job title (See Instructions) DIRECTOR OF TECHNOLOGY		Employer (See Instructions) RGT WEALTH ADVISORS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/24 Rpt: 25/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 02/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAPLES, RICK <hr/> 6 Contributor address; City; State; Zip Code TIOGA, TX 76271	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) DIRECTOR OF TECHNOLOGY		9 Employer (See Instructions) RGT WEALTH ADVISORS
Date 03/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAPLES, RICK <hr/> Contributor address; City; State; Zip Code TIOGA, TX 76271	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DIRECTOR OF TECHNOLOGY		Employer (See Instructions) RGT WEALTH ADVISORS
Date 04/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAPLES, RICK <hr/> Contributor address; City; State; Zip Code TIOGA, TX 76271	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DIRECTOR OF TECHNOLOGY		Employer (See Instructions) RGT WEALTH ADVISORS
Date 05/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAPLES, RICK <hr/> Contributor address; City; State; Zip Code TIOGA, TX 76271	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DIRECTOR OF TECHNOLOGY		Employer (See Instructions) RGT WEALTH ADVISORS
Date 06/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STAPLES, RICK <hr/> Contributor address; City; State; Zip Code TIOGA, TX 76271	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) DIRECTOR OF TECHNOLOGY		Employer (See Instructions) RGT WEALTH ADVISORS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/24 Rpt: 26/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 03/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) STREET, JANE <hr/> 6 Contributor address; City; State; Zip Code SHERMAN, TX 75092	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) RETIRED		9 Employer (See Instructions) RETIRED
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TATE, KEWINNA <hr/> Contributor address; City; State; Zip Code DENISON, TX 75020	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRAWICK, THOMAS <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, SHARRON <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, WILLIAM <hr/> Contributor address; City; State; Zip Code WHITESBORO, TX 76273	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) GENERAL CONTRACTOR		Employer (See Instructions) SELF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/24 Rpt: 27/40
2 FILER NAME Grayson County Republican Party (CEC)		3 Filer ID (Ethics Commission Filers) 00035364
4 Date 05/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WELCH, WILLIAM	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code WHITESBORO, TX 76273		
8 Principal occupation / Job title (See Instructions) GENERAL CONTRACTOR		9 Employer (See Instructions) SELF
Date 03/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIS, JOE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code SHERMAN, TX 75090		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, CARYN	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code COLLINSVILLE, TX 76233		
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOOLSEY, DEWAYNE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code WHITESBORO, TX 76273		
Principal occupation / Job title (See Instructions) FIREFIGHTER		Employer (See Instructions) WHITESBORO
Date 02/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZERINGUE, MADELINE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code DENISON, TX 75020		
Principal occupation / Job title (See Instructions) MARKETING		Employer (See Instructions) TETON RIDGE

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/13 Rpt: 28/40	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
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4 Date 02/21/2023	5 Payee name ALEXANDER, STACEY
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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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CHRISTMAS PARADE
---------------------------------	--	--

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 01/17/2023	Payee name FLANDERS, DEBBIE
--------------------	--------------------------------

Amount (\$) \$348.13	Payee address; City; State; Zip Code 1603 IDLEWOOD DR. SHERMAN, TX 75092
-------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ELECTION NIGHT PARTY
-------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 01/13/2023	Payee name GUMROAD, INC.
--------------------	-----------------------------

Amount (\$) \$9.00	Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104
-----------------------	---

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

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/13 Rpt: 29/40	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/27/2023	5 Payee name GUMROAD, INC.	
6 Amount (\$) \$9.00	7 Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-COMMERCE FEES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/03/2023	Payee name GUMROAD, INC.	
Amount (\$) \$7.25	Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-COMMERCE FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/10/2023	Payee name GUMROAD, INC.	
Amount (\$) \$9.00	Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-COMMERCE FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/13 Rpt: 30/40	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 02/24/2023	5 Payee name GUMROAD, INC.	
6 Amount (\$) \$9.00	7 Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-COMMERCE FEES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/03/2023	Payee name GUMROAD, INC.	
Amount (\$) \$7.25	Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-COMMERCE FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/10/2023	Payee name GUMROAD, INC.	
Amount (\$) \$9.00	Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-COMMERCE FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/13 Rpt: 31/40	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
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4 Date 03/24/2023	5 Payee name GUMROAD, INC.
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6 Amount (\$) \$9.00	7 Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-COMMERCE FEES
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/31/2023	Payee name GUMROAD, INC.
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Amount (\$) \$7.25	Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-COMMERCE FEES
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/14/2023	Payee name GUMROAD, INC.
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Amount (\$) \$9.00	Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-COMMERCE FEES
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/13 Rpt: 32/40	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 04/28/2023	5 Payee name GUMROAD, INC.	
6 Amount (\$) \$9.00	7 Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-COMMERCE FEES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/05/2023	Payee name GUMROAD, INC.	
Amount (\$) \$10.13	Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-COMMERCE FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/12/2023	Payee name GUMROAD, INC.	
Amount (\$) \$9.00	Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-COMMERCE FEES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/13 Rpt: 33/40	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 05/26/2023	5 Payee name GUMROAD, INC.	
6 Amount (\$) \$9.00	7 Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-COMMERCE FEES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/02/2023	Payee name GUMROAD, INC.	
Amount (\$) \$8.43	Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-COMMERCE FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/09/2023	Payee name GUMROAD, INC.	
Amount (\$) \$7.30	Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-COMMERCE FEES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 7/13 Rpt: 34/40	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4	Date 06/30/2023	5 Payee name GUMROAD, INC.	
6	Amount (\$) \$9.00	7 Payee address; City; State; Zip Code 548 MARKET STREET #41309 SAN FRANCISCO, CA 94104	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense E-COMMERCE FEES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate/Officeholder name	Office sought	Office held
4	Date 05/22/2023	5 Payee name IRON CREEK STORAGE	
6	Amount (\$) \$55.58	7 Payee address; City; State; Zip Code 8724 FM1417 SHERMAN, TX 75090	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STORAGE RENTAL
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate/Officeholder name	Office sought	Office held
4	Date 05/30/2023	5 Payee name IRON CREEK STORAGE	
6	Amount (\$) \$41.26	7 Payee address; City; State; Zip Code 8724 FM1417 SHERMAN, TX 75090	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STORAGE RENTAL
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/13 Rpt: 35/40	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
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4 Date 06/05/2023	5 Payee name IRON CREEK STORAGE
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6 Amount (\$) \$163.00	7 Payee address; City; State; Zip Code 8724 FM1417 SHERMAN, TX 75090
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STORAGE RENTAL
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/01/2023	Payee name LOS HERMANOS PARTNERSHIP
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Amount (\$) \$1,170.00	Payee address; City; State; Zip Code 427 N Rusk Suite B SHERMAN, TX 75090
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HEADQUARTERS RENT AND UTILITIES
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/01/2023	Payee name LOS HERMANOS PARTNERSHIP
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Amount (\$) \$1,170.00	Payee address; City; State; Zip Code 427 N Rusk Suite B SHERMAN, TX 75090
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HEADQUARTERS RENT AND UTILITIES
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/13 Rpt: 36/40	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
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4 Date 03/04/2023	5 Payee name LOS HERMANOS PARTNERSHIP
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6 Amount (\$) \$1,170.00	7 Payee address; City; State; Zip Code 427 N Rusk Suite B SHERMAN, TX 75090
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HEADQUARTERS RENT AND UTILITIES
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/01/2023	Payee name LOS HERMANOS PARTNERSHIP
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Amount (\$) \$1,170.00	Payee address; City; State; Zip Code 427 N Rusk Suite B SHERMAN, TX 75090
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HEADQUARTERS RENT AND UTILITIES
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/01/2023	Payee name LOS HERMANOS PARTNERSHIP
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Amount (\$) \$1,170.00	Payee address; City; State; Zip Code 427 N Rusk Suite B SHERMAN, TX 75090
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HEADQUARTERS RENT AND UTILITIES
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/13 Rpt: 37/40	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 01/17/2023	5 Payee name MCCOY, ROBIN (Ms.)	
6 Amount (\$) \$285.21	7 Payee address; City; State; Zip Code 746 OLD HWY HOWE, TX 75459	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ELECTION NIGHT PARTY
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/21/2023	Payee name MCCOY, ROBIN (Ms.)	
Amount (\$) \$50.62	Payee address; City; State; Zip Code 746 OLD HWY HOWE, TX 75459	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BOOTH RENTAL
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/09/2023	Payee name RELIANT ENERGY	
Amount (\$) \$26.56	Payee address; City; State; Zip Code PO BOX 650475 DALLAS, TX 75265-0475	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HEADQUARTERS RENT AND UTILITIES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/13 Rpt: 38/40	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 02/09/2023	5 Payee name RELIANT ENERGY	
6 Amount (\$) \$34.06	7 Payee address; City; State; Zip Code PO BOX 650475 DALLAS, TX 75265-0475	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HEADQUARTERS RENT AND UTILITIES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/13/2023	Payee name RELIANT ENERGY	
Amount (\$) \$43.43	Payee address; City; State; Zip Code PO BOX 650475 DALLAS, TX 75265-0475	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HEADQUARTERS RENT AND UTILITIES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/12/2023	Payee name RELIANT ENERGY	
Amount (\$) \$48.92	Payee address; City; State; Zip Code PO BOX 650475 DALLAS, TX 75265-0475	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HEADQUARTERS RENT AND UTILITIES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/13 Rpt: 39/40	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
4 Date 05/12/2023	5 Payee name RELIANT ENERGY	
6 Amount (\$) \$68.52	7 Payee address; City; State; Zip Code PO BOX 650475 DALLAS, TX 75265-0475	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HEADQUARTERS RENT AND UTILITIES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/12/2023	Payee name RELIANT ENERGY	
Amount (\$) \$54.11	Payee address; City; State; Zip Code PO BOX 650475 DALLAS, TX 75265-0475	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HEADQUARTERS RENT AND UTILITIES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/21/2023	Payee name RELIANT ENERGY	
Amount (\$) \$69.75	Payee address; City; State; Zip Code PO BOX 650475 DALLAS, TX 75265-0475	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HEADQUARTERS RENT AND UTILITIES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/13 Rpt: 40/40	2 FILER NAME Grayson County Republican Party (CEC)	3 Filer ID (Ethics Commission Filers) 00035364
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4 Date 01/17/2023	5 Payee name WHITMORE, CHRISTINE
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6 Amount (\$) \$233.80	7 Payee address; City; State; Zip Code 2834 ELLIOTT RD SHERMAN, TX 75092
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ELECTION NIGHT PARTY
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/21/2023	Payee name WHITMORE, CHRISTINE
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Amount (\$) \$91.10	Payee address; City; State; Zip Code 2834 ELLIOTT RD SHERMAN, TX 75092
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ST PATRICK'S DAY PARADE
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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