FORM PTY-CORP POLITICAL PARTY REPORT REGARDING FUNDS FROM CORPORATIONS AND LABOR ORGANIZATIONS **COVER SHEET PG 1** Filer ID 2 Total pages filed The Form PTY-CORP Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00023797 POLITICAL PARTY Hidalgo County Republican Party (P) **OFFICE USE ONLY** NAME Date Received STATE OR COUNTY **ELECTRONICALLY FILED** State **PARTY** 07/17/2023 X County: Hidalgo POLITICAL PARTY Democrat **TYPE** Republican Libertarian Other: Date Hand-delivered or Date Postmarked (Party name) Receipt # Amount POLITICAL PARTY ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE MAILING ADDRESS 4900 North 23rd Street Date Processed Change of Address McAllen, TX 78504 Date Imaged POLITICAL PARTY TITLE **FIRST NICKNAME** LAST **SUFFIX** MΙ **CHAIR** Adrienne Pena-Garza **CHAIR MAILING** ADDRESS / PO BOX; ZIP CODE APT / SUITE #; CITY; STATE; **ADDRESS** 1800 Angelina Marie Change of Address Pharr, TX 78577 CHAIR STREET STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: STATE; ZIP CODE **ADDRESS** 1800 Angelina Marie (Residence or Business) Pharr, TX 78577 AREA CODE PHONE NUMBER **10** CHAIR PHONE **EXTENSION** (956) 803-0111 11 REPORT TYPE January 15 8th day before primary election X July 15 50th day before general election 12 PERIOD COVERED Month Day Year Month Day Year **THROUGH** 01/01/2023 06/30/2023 **GO TO PAGE 2**

FORM PTY-CORP **POLITICAL PARTY REPORT: TOTALS AND AFFIDAVIT COVER SHEET PG 2** 14 Filer ID 13 POLITICAL PARTY NAME (Ethics Commission Filers) 00023797 Hidalgo County Republican Party (P) 15 TOTALS 1. TOTAL CONTRIBUTIONS FROM CORPORATE OR LABOR **ORGANIZATIONS** \$ 0.00 (OTHER THAN LOANS OR GUARANTEES OF LOANS) 2. TOTAL EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS \$ 90.00 3. TOTAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 969.06 A political party must file a report on FORM PTY-CORP for any reporting period during which the party accepts corporate or labor organization contributions, maintains corporate or labor organization contributions, or makes expenditures from corporate or labor organization contributions. 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. The Honorable Adrienne Pena-Garza

AFFIX NOTARY STAMP / SEAL

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 Political Party Chair

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

FORM PTY-CORP **SUBTOTALS - PTYCORP COVER SHEET PG 3** 17 POLITICAL PARTY NAME 18 Filer ID (Ethics Commission Filers) Hidalgo County Republican Party (P) 00023797 19 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR \$ **ORGANIZATION** SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR 2. \$ LABOR ORGANIZATION SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$ 3. SCHEDULE E: LOANS \$ SCHEDULE F1: EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION 5. X 90.00 \$ **CONTRIBUTIONS** SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$

EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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Travel in District
Travel Out of District
OTHER Content of the Content and Intent of the Content of t

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 1/2 Rpt: 4/5	Hidalgo County Republican Party (P) 00023797			
4 Date	5 Payee name			
01/31/2023	Frost Bank			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$15.00	PO Box 2678			
X Expenditure from corporate funds	McAllen, TX 78502			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.			
	Bank Service Charge			
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EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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