

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

<b>The GPAC Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00087637	<b>2</b> Total pages filed: 53
<b>3</b> COMMITTEE NAME Denton County Republican Lincoln Cabinet		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 01/10/2024	
<b>4</b> COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 50748  Denton, TX 76206		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
		Date Imaged	
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Mrs. Kellie	MI	
	NICKNAME LAST Mason	SUFFIX	
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4120 Austin Circle  Sanger, TX 76266		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 50748  Denton, TX 76206		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (940) 395-9377		
<b>9</b> REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination		
<b>10</b> PERIOD COVERED	Month Day Year      THROUGH      Month Day Year 07/01/2023      12/31/2023		
<b>11</b> ELECTION	ELECTION DATE Month Day Year 03/05/2024		ELECTION TYPE
			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special

**GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Denton County Republican Lincoln Cabinet	<b>13 Filer ID</b> (Ethics Commission Filers) 00087637
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Republican
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b>	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 85,551.30
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 47,355.43
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 64,078.13
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 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.

Mrs. Kellie Mason  
\_\_\_\_\_  
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 - GPAC

<b>17 COMMITTEE NAME</b> Denton County Republican Lincoln Cabinet		<b>18 Filer ID</b> (Ethics Commission Filers) 00087637
<b>19 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 85,551.30
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 C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 47,355.43
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/26 Rpt: 4/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 07/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adams, Judy	<b>7</b> Amount of Contribution (\$) \$209.00
<b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75033		
<b>8</b> Principal occupation / Job title (See Instructions) Entrepreneur		<b>9</b> Employer (See Instructions) Self
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adams, Judy	Amount of Contribution (\$) \$209.00
Contributor address; City; State; Zip Code  Frisco, TX 75033		
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adams, Judy	Amount of Contribution (\$) \$209.00
Contributor address; City; State; Zip Code  Frisco, TX 75033		
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adams, Judy	Amount of Contribution (\$) \$209.00
Contributor address; City; State; Zip Code  Frisco, TX 75033		
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adams, Judy	Amount of Contribution (\$) \$209.00
Contributor address; City; State; Zip Code  Frisco, TX 75033		
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/26 Rpt: 5/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 07/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Altman, Rob <hr/> <b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75033	<b>7</b> Amount of Contribution (\$)  \$209.00
<b>8</b> Principal occupation / Job title (See Instructions) Business Manager		<b>9</b> Employer (See Instructions) JPMorgan Chase
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Altman, Rob <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75033	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Business Manager		Employer (See Instructions) JPMorgan Chase
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Altman, Rob <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75033	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Business Manager		Employer (See Instructions) JPMorgan Chase
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Altman, Rob <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75033	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Business Manager		Employer (See Instructions) JPMorgan Chase
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Altman, Rob <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75033	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Business Manager		Employer (See Instructions) JPMorgan Chase

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/26 Rpt: 6/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 12/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Altman, Rob <hr/> <b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75033	<b>7</b> Amount of Contribution (\$)  \$209.00
<b>8</b> Principal occupation / Job title (See Instructions) Business Manager		<b>9</b> Employer (See Instructions) JPMorgan Chase
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Azzelio, Jennifer <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75033	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Parent		Employer (See Instructions) Self
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bassel, Dabney <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76112	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Appeals Court Justice		Employer (See Instructions) State of Texas
Date 08/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bassel, Dabney <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76112	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Appeals Court Justice		Employer (See Instructions) State of Texas
Date 09/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bassel, Dabney <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76112	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Appeals Court Justice		Employer (See Instructions) State of Texas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/26 Rpt: 7/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 10/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bassel, Dabney <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76112	<b>7</b> Amount of Contribution (\$)  \$209.00
<b>8</b> Principal occupation / Job title (See Instructions) Appeals Court Justice		<b>9</b> Employer (See Instructions) State of Texas
Date 11/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bassel, Dabney <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76112	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Appeals Court Justice		Employer (See Instructions) State of Texas
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bassel, Dabney <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76112	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Appeals Court Justice		Employer (See Instructions) State of Texas
Date 08/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bates, Diane <hr/> Contributor address; City; State; Zip Code  Trophy Club, TX 76262	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bates, Diane <hr/> Contributor address; City; State; Zip Code  Trophy Club, TX 76262	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/26 Rpt: 8/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 10/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bates, Diane <hr/> <b>6</b> Contributor address; City; State; Zip Code  Trophy Club, TX 76262	<b>7</b> Amount of Contribution (\$)  \$209.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bates, Diane <hr/> Contributor address; City; State; Zip Code  Trophy Club, TX 76262	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bates, Diane <hr/> Contributor address; City; State; Zip Code  Trophy Club, TX 76262	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bates, Diane <hr/> Contributor address; City; State; Zip Code  Trophy Club, TX 76262	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bowen, Brent <hr/> Contributor address; City; State; Zip Code  Denton, TX 76205	Amount of Contribution (\$)  \$625.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office of Brent Bowen



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/26 Rpt: 9/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 07/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Breathing, Lee Ann <hr/> <b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76209	<b>7</b> Amount of Contribution (\$)  \$209.00
<b>8</b> Principal occupation / Job title (See Instructions) Judge		<b>9</b> Employer (See Instructions) State of Texas
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Breathing, Lee Ann <hr/> Contributor address; City; State; Zip Code  Denton, TX 76209	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Breathing, Lee Ann <hr/> Contributor address; City; State; Zip Code  Denton, TX 76209	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Breathing, Lee Ann <hr/> Contributor address; City; State; Zip Code  Denton, TX 76209	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Breathing, Lee Ann <hr/> Contributor address; City; State; Zip Code  Denton, TX 76209	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 7/26 Rpt: 10/53
2 FILER NAME Denton County Republican Lincoln Cabinet		3 Filer ID (Ethics Commission Filers) 00087637
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Breathing, Lee Ann	7 Amount of Contribution (\$) \$209.00
	6 Contributor address; City; State; Zip Code  Denton, TX 76209	
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) State of Texas
Date 08/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carroll, Tom	Amount of Contribution (\$) \$209.00
	Contributor address; City; State; Zip Code  Lantana, TX 76226	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Panasonic Connect North America
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, James	Amount of Contribution (\$) \$209.00
	Contributor address; City; State; Zip Code  Justin, TX 76247	
Principal occupation / Job title (See Instructions) Mayor		Employer (See Instructions) City of Justin
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, James	Amount of Contribution (\$) \$209.00
	Contributor address; City; State; Zip Code  Justin, TX 76247	
Principal occupation / Job title (See Instructions) Mayor		Employer (See Instructions) City of Justin
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, James	Amount of Contribution (\$) \$209.00
	Contributor address; City; State; Zip Code  Justin, TX 76247	
Principal occupation / Job title (See Instructions) Mayor		Employer (See Instructions) City of Justin

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/26 Rpt: 11/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 10/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, James <hr/> <b>6</b> Contributor address; City; State; Zip Code  Justin, TX 76247	<b>7</b> Amount of Contribution (\$)  \$209.00
<b>8</b> Principal occupation / Job title (See Instructions) Mayor		<b>9</b> Employer (See Instructions) City of Justin
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Core, Marc <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75035	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Marc R Core CPA PC
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Core, Marc <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75035	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Marc R Core CPA PC
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Core, Marc <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75035	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Marc R Core CPA PC
Date 12/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Core, Marc <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75035	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Marc R Core CPA PC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/26 Rpt: 12/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 07/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Costa, Dianne <hr/> <b>6</b> Contributor address; City; State; Zip Code  Highland Village, TX 75077	<b>7</b> Amount of Contribution (\$)  \$209.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Costa, Dianne <hr/> Contributor address; City; State; Zip Code  Highland Village, TX 75077	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Costa, Dianne <hr/> Contributor address; City; State; Zip Code  Highland Village, TX 75077	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Costa, Dianne <hr/> Contributor address; City; State; Zip Code  Highland Village, TX 75077	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Costa, Dianne <hr/> Contributor address; City; State; Zip Code  Highland Village, TX 75077	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/26 Rpt: 13/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 12/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Costa, Dianne <hr/> <b>6</b> Contributor address; City; State; Zip Code  Highland Village, TX 75077	<b>7</b> Amount of Contribution (\$)  \$209.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Denny, Mary <hr/> Contributor address; City; State; Zip Code  Aubrey , TX 76227	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Denny, Mary <hr/> Contributor address; City; State; Zip Code  Aubrey , TX 76227	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Donnelly, Mike <hr/> Contributor address; City; State; Zip Code  Double Oak, TX 75077	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Fleet Service		Employer (See Instructions) American Airlines
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Donnelly, Mike <hr/> Contributor address; City; State; Zip Code  Double Oak, TX 75077	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Fleet Service		Employer (See Instructions) American Airlines

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/26 Rpt: 14/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 09/27/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Donnelly, Mike <hr/> <b>6</b> Contributor address; City; State; Zip Code  Double Oak, TX 75077	<b>7</b> Amount of Contribution (\$)  \$209.00
<b>8</b> Principal occupation / Job title (See Instructions) Fleet Service		<b>9</b> Employer (See Instructions) American Airlines
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Donnelly, Mike <hr/> Contributor address; City; State; Zip Code  Double Oak, TX 75077	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Fleet Service		Employer (See Instructions) American Airlines
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Donnelly, Mike <hr/> Contributor address; City; State; Zip Code  Double Oak, TX 75077	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Fleet Service		Employer (See Instructions) American Airlines
Date 12/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Donnelly, Mike <hr/> Contributor address; City; State; Zip Code  Double Oak, TX 75077	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Fleet Service		Employer (See Instructions) American Airlines
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Friends of Andy Eads <hr/> Contributor address; City; State; Zip Code  Flower Mound, TX 75028	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/26 Rpt: 15/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 07/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goline, Greg <hr/> <b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76209	<b>7</b> Amount of Contribution (\$)  \$209.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Goline & Roland Law Firm
Date 08/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goline, Greg <hr/> Contributor address; City; State; Zip Code  Denton, TX 76209	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Goline & Roland Law Firm
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goline, Greg <hr/> Contributor address; City; State; Zip Code  Denton, TX 76209	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Goline & Roland Law Firm
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goline, Greg <hr/> Contributor address; City; State; Zip Code  Denton, TX 76209	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Goline & Roland Law Firm
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goline, Greg <hr/> Contributor address; City; State; Zip Code  Denton, TX 76209	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Goline & Roland Law Firm

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/26 Rpt: 16/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 12/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goline, Greg <hr/> <b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76209	<b>7</b> Amount of Contribution (\$)  \$209.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Goline & Roland Law Firm
Date 07/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hagenbuch, Brent <hr/> Contributor address; City; State; Zip Code  Little Elm, TX 75068	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Business Executive		Employer (See Instructions) Titus Transport
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hagenbuch, Brent <hr/> Contributor address; City; State; Zip Code  Little Elm, TX 75068	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Business Executive		Employer (See Instructions) Titus Transport
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hagenbuch, Brent <hr/> Contributor address; City; State; Zip Code  Little Elm, TX 75068	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Business Executive		Employer (See Instructions) Titus Transport
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hagenbuch, Brent <hr/> Contributor address; City; State; Zip Code  Denton, TX 76210	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Business Executive		Employer (See Instructions) Titus Transport



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 14/26 Rpt: 17/53
2 FILER NAME Denton County Republican Lincoln Cabinet		3 Filer ID (Ethics Commission Filers) 00087637
4 Date 10/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hagenbuch, Brent	7 Amount of Contribution (\$) \$10,000.00
	6 Contributor address; City; State; Zip Code  Denton, TX 76210	
8 Principal occupation / Job title (See Instructions) Business Executive		9 Employer (See Instructions) Titus Transport
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holliday, Mark	Amount of Contribution (\$) \$625.00
	Contributor address; City; State; Zip Code  The Colony, TX 75056	
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) Quiddity Engineering
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holliday, Mark	Amount of Contribution (\$) \$625.00
	Contributor address; City; State; Zip Code  The Colony, TX 75056	
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) Quiddity Engineering
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jim Johnson Campaign	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code  Denton, TX 76210	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jim Johnson Campaign	Amount of Contribution (\$) \$337.50
	Contributor address; City; State; Zip Code  Denton, TX 76210	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/26 Rpt: 18/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 07/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Pam <hr/> <b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76210	<b>7</b> Amount of Contribution (\$)  \$209.00
<b>8</b> Principal occupation / Job title (See Instructions) Paralegal		<b>9</b> Employer (See Instructions) Self
Date 08/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Pam <hr/> Contributor address; City; State; Zip Code  Denton, TX 76210	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Self
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Pam <hr/> Contributor address; City; State; Zip Code  Denton, TX 76210	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Self
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Pam <hr/> Contributor address; City; State; Zip Code  Denton, TX 76210	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Self
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Pam <hr/> Contributor address; City; State; Zip Code  Denton, TX 76210	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/26 Rpt: 19/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 12/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Pam	<b>7</b> Amount of Contribution (\$) \$209.00
<b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76210		
<b>8</b> Principal occupation / Job title (See Instructions) Paralegal		<b>9</b> Employer (See Instructions) Self
Date 09/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Pam	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code  Denton, TX 76210		
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Self
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Pam	Amount of Contribution (\$) \$465.01
Contributor address; City; State; Zip Code  Denton, TX 76210		
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Self
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) King, Frank	Amount of Contribution (\$) \$209.00
Contributor address; City; State; Zip Code  Denton, TX 76207		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) King, Frank	Amount of Contribution (\$) \$209.00
Contributor address; City; State; Zip Code  Denton, TX 76207		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/26 Rpt: 20/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 12/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) King, Frank ..... <b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76207	<b>7</b> Amount of Contribution (\$)  \$209.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Krona Thimesch Campaign ..... Contributor address; City; State; Zip Code  Lewisville, TX 75077	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Krona Thimesch Campaign ..... Contributor address; City; State; Zip Code  Lewisville, TX 75077	Amount of Contribution (\$)  \$6,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lawrence, Bill ..... Contributor address; City; State; Zip Code  Highland Village, TX 75077	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lawrence, Bill ..... Contributor address; City; State; Zip Code  Highland Village, TX 75077	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 18/26 Rpt: 21/53
2 FILER NAME Denton County Republican Lincoln Cabinet		3 Filer ID (Ethics Commission Filers) 00087637
4 Date 09/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lawrence, Bill	7 Amount of Contribution (\$) \$209.00
	6 Contributor address; City; State; Zip Code  Highland Village, TX 75077	
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lawrence, Bill	Amount of Contribution (\$) \$209.00
	Contributor address; City; State; Zip Code  Highland Village, TX 75077	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lawrence, Bill	Amount of Contribution (\$) \$209.00
	Contributor address; City; State; Zip Code  Highland Village, TX 75077	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lawrence, Bill	Amount of Contribution (\$) \$209.00
	Contributor address; City; State; Zip Code  Highland Village, TX 75077	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 07/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lipscomb D.D.S, Scott (Dr.)	Amount of Contribution (\$) \$209.00
	Contributor address; City; State; Zip Code  Cross Roads, TX 76227	
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/26 Rpt: 22/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 09/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lipscomb D.D.S, Scott (Dr.)	<b>7</b> Amount of Contribution (\$) \$209.00
<b>6</b> Contributor address; City; State; Zip Code  Cross Roads, TX 76227		
<b>8</b> Principal occupation / Job title (See Instructions) Dentist		<b>9</b> Employer (See Instructions) Self
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lipscomb D.D.S, Scott (Dr.)	Amount of Contribution (\$) \$209.00
Contributor address; City; State; Zip Code  Cross Roads, TX 76227		
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Self
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lipscomb D.D.S, Scott (Dr.)	Amount of Contribution (\$) \$209.00
Contributor address; City; State; Zip Code  Cross Roads, TX 76227		
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Self
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lipscomb D.D.S, Scott (Dr.)	Amount of Contribution (\$) \$209.00
Contributor address; City; State; Zip Code  Cross Roads, TX 76227		
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Self
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lipscomb D.D.S, Scott (Dr.)	Amount of Contribution (\$) \$209.00
Contributor address; City; State; Zip Code  Cross Roads, TX 76227		
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/26 Rpt: 23/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 09/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Livingston, Bryan	<b>7</b> Amount of Contribution (\$) \$625.00
<b>6</b> Contributor address; City; State; Zip Code  Argyle, TX 76226		
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Oaklins Capital Alliance
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Livingston, Bryan	Amount of Contribution (\$) \$625.00
Contributor address; City; State; Zip Code  Argyle, TX 76226		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Oaklins Capital Alliance
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lynn Stucky Campaign	Amount of Contribution (\$) \$1,487.50
Contributor address; City; State; Zip Code  Denton, TX 76202		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mason, Kellie	Amount of Contribution (\$) \$14.00
Contributor address; City; State; Zip Code  Sanger, TX 76266		
Principal occupation / Job title (See Instructions) Business Executive		Employer (See Instructions) Rock On Framing, Inc.
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mason, Kellie	Amount of Contribution (\$) \$10,000.29
Contributor address; City; State; Zip Code  Sanger, TX 76266		
Principal occupation / Job title (See Instructions) Business Executive		Employer (See Instructions) Rock On Framing, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/26 Rpt: 24/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 09/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Meek, Dena <hr/> <b>6</b> Contributor address; City; State; Zip Code  Oak Point, TX 75068	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Meek, Dena <hr/> Contributor address; City; State; Zip Code  Oak Point, TX 75068	Amount of Contribution (\$)  \$1,700.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Melson, Bridget <hr/> Contributor address; City; State; Zip Code  Bartonville, TX 76226	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murad Auction Group, LLC <hr/> Contributor address; City; State; Zip Code  Richardson, TX 75083	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pausman, Karen <hr/> Contributor address; City; State; Zip Code  DENTON, TX 76210	Amount of Contribution (\$)  \$625.00
Principal occupation / Job title (See Instructions) Area Manager for Senator Drew Springer		Employer (See Instructions) State of Texas



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/26 Rpt: 25/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 12/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Powers, Tim <hr/> <b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76201	<b>7</b> Amount of Contribution (\$)  \$6,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Law Offices of Tim Powers
Date 08/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robson Ranch Republican Club <hr/> Contributor address; City; State; Zip Code  Denton, TX 76207	Amount of Contribution (\$)  \$2,800.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robson Ranch Republican Club <hr/> Contributor address; City; State; Zip Code  Denton, TX 76207	Amount of Contribution (\$)  \$1,400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robson Ranch Republican Club <hr/> Contributor address; City; State; Zip Code  Denton, TX 76207	Amount of Contribution (\$)  \$1,400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robson Ranch Republican Club <hr/> Contributor address; City; State; Zip Code  Denton, TX 76207	Amount of Contribution (\$)  \$2,800.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/26 Rpt: 26/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 09/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robson Ranch Republican Club <hr/> <b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76207	<b>7</b> Amount of Contribution (\$)  \$1,400.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shipman, Sherry <hr/> Contributor address; City; State; Zip Code  Denton, TX 76205	Amount of Contribution (\$)  \$625.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shugart, Keith <hr/> Contributor address; City; State; Zip Code  Denton, TX 76201	Amount of Contribution (\$)  \$625.00
Principal occupation / Job title (See Instructions) Business Executive		Employer (See Instructions) Legacy Airline
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Springer, Drew <hr/> Contributor address; City; State; Zip Code  Muenster, TX 76252	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Springer Financial
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tracy Murphree Campaign <hr/> Contributor address; City; State; Zip Code  Sanger , TX 76266	Amount of Contribution (\$)  \$1,750.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/26 Rpt: 27/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 07/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Washington, Tom <hr/> <b>6</b> Contributor address; City; State; Zip Code  Carrollton, TX 75007	<b>7</b> Amount of Contribution (\$)  \$209.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Self
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Washington, Tom <hr/> Contributor address; City; State; Zip Code  Carrollton, TX 75007	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 09/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Washington, Tom <hr/> Contributor address; City; State; Zip Code  Carrollton, TX 75007	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Washington, Tom <hr/> Contributor address; City; State; Zip Code  Carrollton, TX 75007	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Washington, Tom <hr/> Contributor address; City; State; Zip Code  Carrollton, TX 75007	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/26 Rpt: 28/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 12/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Washington, Tom	<b>7</b> Amount of Contribution (\$) \$209.00
<b>6</b> Contributor address; City; State; Zip Code  Carrollton, TX 75007		
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Self
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wheeler, Alan	Amount of Contribution (\$) \$209.00
Contributor address; City; State; Zip Code  Lantana, TX 76226		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Denton County
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woodard, Jordan	Amount of Contribution (\$) \$209.00
Contributor address; City; State; Zip Code  Providence Village, TX 76227		
Principal occupation / Job title (See Instructions) Court Clerk		Employer (See Instructions) Denton County
Date 08/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woodard, Jordan	Amount of Contribution (\$) \$209.00
Contributor address; City; State; Zip Code  Providence Village, TX 76227		
Principal occupation / Job title (See Instructions) Court Clerk		Employer (See Instructions) Denton County
Date 09/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woodard, Jordan	Amount of Contribution (\$) \$209.00
Contributor address; City; State; Zip Code  Providence Village, TX 76227		
Principal occupation / Job title (See Instructions) Court Clerk		Employer (See Instructions) Denton County

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/26 Rpt: 29/53
<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet		<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 10/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woodard, Jordan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Providence Village, TX 76227	<b>7</b> Amount of Contribution (\$)  \$209.00
<b>8</b> Principal occupation / Job title (See Instructions) Court Clerk		<b>9</b> Employer (See Instructions) Denton County
Date 11/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woodard, Jordan <hr/> Contributor address; City; State; Zip Code  Providence Village, TX 76227	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Court Clerk		Employer (See Instructions) Denton County
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woodard, Jordan <hr/> Contributor address; City; State; Zip Code  Providence Village, TX 76227	Amount of Contribution (\$)  \$209.00
Principal occupation / Job title (See Instructions) Court Clerk		Employer (See Instructions) Denton County
Date 08/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zilinsky, Peggy <hr/> Contributor address; City; State; Zip Code  Denton, TX 76207	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) Town of Argyle

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/24 Rpt: 30/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 07/09/2023	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$25.98  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/11/2023	Payee name Anedot	
Amount (\$) \$17.32  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2023	Payee name Anedot	
Amount (\$) \$17.32  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 2/24 Rpt: 31/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 12/31/2023	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/07/2023	Payee name Anedot	
Amount (\$) \$80.30  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/06/2023	Payee name Anedot	
Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 3/24 Rpt: 32/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 07/06/2023	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/13/2023	Payee name Anedot	
Amount (\$) \$100.30  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/18/2023	Payee name Anedot	
Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 4/24 Rpt: 33/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 07/17/2023	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/19/2023	Payee name Anedot	
Amount (\$) \$17.32  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/27/2023	Payee name Anedot	
Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 5/24 Rpt: 34/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 07/31/2023	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$25.98  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/02/2023	Payee name Anedot	
Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/04/2023	Payee name Anedot	
Amount (\$) \$17.32  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 6/24 Rpt: 35/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 08/10/2023	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$17.32  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/14/2023	Payee name Anedot	
Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/16/2023	Payee name Anedot	
Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 7/24 Rpt: 36/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
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<b>4</b> Date 08/24/2023	<b>5</b> Payee name Anedot
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<b>6</b> Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/22/2023	Payee name Anedot
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Amount (\$) \$17.32  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/30/2023	Payee name Anedot
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Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
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Complete ONLY 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.

<b>1</b> Total pages Schedule F1: Sch: 8/24 Rpt: 37/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
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<b>4</b> Date 08/30/2023	<b>5</b> Payee name Anedot
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<b>6</b> Amount (\$) \$25.98  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/01/2023	Payee name Anedot
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Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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 09/06/2023	Payee name Anedot
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Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 9/24 Rpt: 38/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 09/06/2023	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/11/2023	Payee name Anedot	
Amount (\$) \$17.32  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/13/2023	Payee name Anedot	
Amount (\$) \$117.62  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 10/24 Rpt: 39/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
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<b>4</b> Date 09/13/2023	<b>5</b> Payee name Anedot
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<b>6</b> Amount (\$) \$8.66	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/19/2023	Payee name Anedot
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Amount (\$) \$33.96	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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 09/20/2023	Payee name Anedot
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Amount (\$) \$17.32	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112
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Expenditure from corporate funds

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

<b>1</b> Total pages Schedule F1: Sch: 11/24 Rpt: 40/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 09/27/2023	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2023	Payee name Anedot	
Amount (\$) \$25.98  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/03/2023	Payee name Anedot	
Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 12/24 Rpt: 41/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 10/04/2023	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/05/2023	Payee name Anedot	
Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/10/2023	Payee name Anedot	
Amount (\$) \$100.30  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 13/24 Rpt: 42/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 10/11/2023	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$17.32  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2023	Payee name Anedot	
Amount (\$) \$33.96  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/18/2023	Payee name Anedot	
Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 14/24 Rpt: 43/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 10/19/2023	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$17.32  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/24/2023	Payee name Anedot	
Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2023	Payee name Anedot	
Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 15/24 Rpt: 44/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 10/31/2023	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$25.98  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/01/2023	Payee name Anedot	
Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2023	Payee name Anedot	
Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 16/24 Rpt: 45/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
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<b>4</b> Date 11/16/2023	<b>5</b> Payee name Anedot
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<b>6</b> Amount (\$) \$8.66	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/10/2023	Payee name Anedot
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Amount (\$) \$17.32	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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 11/09/2023	Payee name Anedot
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Amount (\$) \$17.32	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112
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Expenditure from corporate funds

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

<b>1</b> Total pages Schedule F1: Sch: 17/24 Rpt: 46/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 11/22/2023	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/27/2023	Payee name Anedot	
Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name Anedot	
Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 18/24 Rpt: 47/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
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<b>4</b> Date 11/30/2023	<b>5</b> Payee name Anedot
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<b>6</b> Amount (\$) \$8.66	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112
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Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/29/2023	Payee name Anedot
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Amount (\$) \$17.32	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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 12/20/2023	Payee name Anedot
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Amount (\$) \$17.32	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112
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Expenditure from corporate funds

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

<b>1</b> Total pages Schedule F1: Sch: 19/24 Rpt: 48/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 12/06/2023	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$17.32  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2023	Payee name Anedot	
Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/28/2023	Payee name Anedot	
Amount (\$) \$17.32  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 20/24 Rpt: 49/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 12/12/2023	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$17.32  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2023	Payee name Anedot	
Amount (\$) \$33.96  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2023	Payee name Anedot	
Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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.

<b>1</b> Total pages Schedule F1: Sch: 21/24 Rpt: 50/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 12/31/2023	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$8.66  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770  New Orleans, LA 70112	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/05/2023	Payee name Embassy Suites by Hilton Denton Convention Center	
Amount (\$) \$25,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3100 Town Center Trail  Denton, TX 76201	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel facility fee deposit for annual gala event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/12/2023	Payee name Embassy Suites by Hilton Denton Convention Center	
Amount (\$) \$9,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3100 Town Center Trail  Denton, TX 76201	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel facility fee deposit for annual gala event
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.

<b>1</b> Total pages Schedule F1: Sch: 22/24 Rpt: 51/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
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<b>4</b> Date 11/20/2023	<b>5</b> Payee name Genuine Texas Hospitality LLC dba Circle R Ranch
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<b>6</b> Amount (\$) \$1,326.60  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 5901 Cross Timbers Road  Flower Mound, TX 75022
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facility fee and refreshments for Lincoln Cabinet Members meeting.
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/03/2023	Payee name Murad Auction Group LLC
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Amount (\$) \$2,947.50  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 831902  Richardson, TX 75083
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software subscription for event management software
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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 08/28/2023	Payee name North Texas Print Solutions
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Amount (\$) \$115.81  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2077 Switzer Rd  Sanger, TX 76266
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Save the Date flyers to promote Lincoln Cabinet annual gala.
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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.

<b>1</b> Total pages Schedule F1: Sch: 23/24 Rpt: 52/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
<b>4</b> Date 11/13/2023	<b>5</b> Payee name North Texas Print Solutions	
<b>6</b> Amount (\$) \$41.44  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2077 Switzer Rd  Sanger, TX 76266	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poster-board signs to promote Lincoln Cabinet annual gala
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2023	Payee name Premiere Speakers Bureau	
Amount (\$) \$7,500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 109 International Drive, Ste. 300  Franklin, TX 37064	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Speaker fee to reserve Riley Gaines as a speaker for Lincoln Cabinet annual gala.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2023	Payee name Stripe Payments Company	
Amount (\$) \$11.80  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 354 Oyster Point Blvd S  San Francisco, TX 94080	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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  | 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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 24/24 Rpt: 53/53	<b>2</b> FILER NAME Denton County Republican Lincoln Cabinet	<b>3</b> Filer ID (Ethics Commission Filers) 00087637
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<b>4</b> Date 09/27/2023	<b>5</b> Payee name Stripe Payments Company
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<b>6</b> Amount (\$) \$0.42  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 354 Oyster Point Blvd S  San Francisco, TX 94080
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank fees
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/06/2023	Payee name Stripe Payments Company
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Amount (\$) \$210.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 354 Oyster Point Blvd S  San Francisco, TX 94080
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank 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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