#### FORM CEC COUNTY EXECUTIVE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The CEC Instruction Guide explains how to complete this form. 75 00055268 3 COMMITTEE NAME **OFFICE USE ONLY Bastrop County Republican Party** Date Received **ELECTRONICALLY FILED** 01/11/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 443 Highway 71 W Date Hand-delivered or Date Postmarked Change of Address Bastrop, TX 78602 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** James NAME NICKNAME LAST **SUFFIX** Page STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 375 Peach Creek Road STREET **ADDRESS** (Residence or Business) Rosanky, TX 78953 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 375 Peach Creek Road MAILING **ADDRESS** Rosanky, TX 78953 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 332-1920 PHONE REPORT January 15 30th day before election Final Report **TYPE** 10th day after campaign treasurer 8th day before election July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2023 12/31/2023 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General χ Special **GO TO PAGE 2**

### COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

### FORM CEC COVER SHEET PG 2

12 COMMITTEE NAME	<del></del>		13 Filer ID	(Ethics Commission Filers)
Bastrop County Republ	ican Party		00055268	3
14 COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed		
		э. орросод		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOAN CONTRIBUTIONS	ED POLITICAL CONTRIBUTIONS (OTHER THAN S, OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) ort qualifies for the higher itemization threshold	\$	0.00
		CAL CONTRIBUTIONS LEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	55,271.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZ	ED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITION	CAL EXPENDITURES	\$	29,636.86
CONTRIBUTION BALANCE	5. TOTAL POLITICA OF THE REPORT	L CONTRIBUTIONS MAINTAINED AS OF THE LAST ING PERIOD	DAY \$	55,271.00
OUTSTANDING LOAN TOTALS		L AMOUNT OF ALL OUTSTANDING LOANS AS OF T E REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	•		•	
		I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.		
		Jame	s Page	
		Signature of Car	mpaign Treas	urer
AFFIX NOTARY	STAMP / SEAL ABOV	E		
Sworn to and subscribed	before me, by the said	, th	nis the	day
Of	_, 20, to certi	fy which, witness my hand and seal of office.		
Circuit ( ff		District and the second of the	Til ( 00	
Signature of officer ad	ministering oath	Printed name of officer administering oath	ittle of off	icer administering oath

#### **SUBTOTALS - CEC**

### FORM CEC COVER SHEET PG 3

					3 of 75
<b>17</b> CC	MMITTE	EE NAME	18 Filer ID	(Eth	ics Commission Filers)
Ва	strop C	ounty Republican Party	00055268		
<b>19</b> SC	HEDULI		CURTOTAL AMOUNT		
NA	ME OF		SUBTOTAL AMOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	44,923.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	10,348.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS	\$		
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	29,636.86
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
10	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL	CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	v to complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/26 Rpt: 4/75	
2	FILER NAME	ınty Republican Party			3	Filer ID (Ethics Commission 00055268	on Filers)
4	Date 09/23/2023	Full name of contributor     Adams, Brian     Contributor address; City; S	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$440.00
8	Principal occu	pation / Job title (See Instruction	s) 9	Employer (See Instructions	<u> </u> ;)		
	Date 12/22/2023	Full name of contributor Allbright, Chris Contributor address; City; S		)		Amount of Contribution (\$)	\$50.00
	Principal occu	Bluff Dale, TX 76433 pation / Job title (See Instruction	s)	Employer (See Instructions	 i)		
	Date 09/23/2023	Full name of contributor Barron, Donald Contributor address; City; S	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$250.00
	Principal occu	TX pation / Job title (See Instruction	s)	Employer (See Instructions	  -  s)		
	?Unknown						
	Date 09/23/2023	Full name of contributor Barron, Donald Contributor address; City; S		)		Amount of Contribution (\$)	\$100.00
		TX pation / Job title (See Instruction	s)	Employer (See Instructions	  -  s)		
	?Unknown  Date  09/23/2023	Full name of contributor  Beck, Stephen  Contributor address; City; S	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$1,000.00
		Cedar Creek, TX 78612					
	Principal occu Retired	pation / Job title (See Instruction	s)	Employer (See Instructions	s)		
			<del></del>			<del></del>	

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/26 Rpt: 5/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commission 00055268	ı Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Beck, Stephen</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$1,590.00
_	<u> </u>	Cedar Creek, TX 78612				
8	Principal occur Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Bezner, Jennifer Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$200.00
	Principal occur	Smithville, TX 78957 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Director	salion, cos uno (coe mondonono)	Employor (GGG morraduon)			
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Bradford, Tim Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$400.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Brading, Charles  Contributor address; City; State; Zip Code  Bastrop, TX 78602			Amount of Contribution (\$)	\$75.00
	Principal occu Retiured	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/28/2023	Full name of contributor out-of-state PAC (ID#: Bransford, Mark  Contributor address; City; State; Zip Code  Elgin, TX 78621			Amount of Contribution (\$)	\$20.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIB	BUTION	IS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to complet	e this for	m.	1	Total pages Schedule A1: Sch: 3/26 Rpt: 6/75	
2	FILER NAME Bastrop Cou	nty Republican Party			3	Filer ID (Ethics Commission 00055268	on Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor  out-of-state F</li> <li>Burke, Dale</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$150.00
8	Principal occu *unknown	pation / Job title (See Instructions)	9	Employer (See Instructions	<u>(</u>		
	Date 09/23/2023	Full name of contributor out-of-state F Burke, Dale Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$110.00
	Principal occu *unknown	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state FBurns, Tamara  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$150.00
		Bastrop, TX 78602 pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state F Caldwell, Mark Contributor address; City; State; Zip Code Bastrop, TX 78602	-	)		Amount of Contribution (\$)	\$250.00
	Principal occu *unknown	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state F Caldwell, Mark Contributor address; City; State; Zip Code  Bastrop, TX 78602				Amount of Contribution (\$)	\$2,310.00
	Principal occu *unknown	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			<b>,</b>				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/26 Rpt: 7/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commission 00055268	n Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$200.00
_	B	Cedar Creek, TX 78612				
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:_ Carlisle, Glen Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$350.00
	Drincinal occu	Cedar Creek, TX 78612 pation / Job title (See Instructions)	Employer (See Instructions			
	Retired	Jation / Job title (See Instructions)	Employer (See instructions	')		
	Date 09/26/2023	Full name of contributor	)		Amount of Contribution (\$)	\$20.00
		Cedar Creek, TX 78612				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:_Carmack, Butch  Contributor address; City; State; Zip Code  Bastrop, TX 78602			Amount of Contribution (\$)	\$100.00
	Principal occu Manager	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:_ Carter, Debra Contributor address; City; State; Zip Code  Cedar Creek, TX 78612	)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
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	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDUI	_E <b>A1</b>
	The Instru	ction Guide explains how to com	nplete this forr	n.	1	Total pages Schedule A1: Sch: 5/26 Rpt: 8/75	
2	FILER NAME Bastrop Cou	nty Republican Party			3	Filer ID (Ethics Commission 00055268	on Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor  out-of- Carter, Zachary</li> <li>Contributor address; City; State; Zip C</li> </ul>	-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$200.00
		Paige, TX 78659					
8	Principal occu JP Pct 2	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of- Carter, Zachary  Contributor address; City; State; Zip C	-state PAC (ID#:			Amount of Contribution (\$)	\$340.00
	Principal occu	Paige, TX 78659 pation / Job title (See Instructions)		Employer (See Instructions	) ;)		
	JP Pct 2	(			,		
	Date 09/23/2023	Full name of contributor out-of- Casper, Kim  Contributor address; City; State; Zip C	-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
		Cedar Creek, TX 78612					
	Principal occu Contractor	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/23/2023	Casper, Scott	-state PAC (ID#:	)		Amount of Contribution (\$)	\$100.00
		oation / Job title (See Instructions) velopment Mgr		Employer (See Instructions	5)		
	Date 09/23/2023	Cook, Maurice	-state PAC (ID#:			Amount of Contribution (\$)	\$75.00
	Principal occu Sheriff	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			l				

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUI	E A1
	The Instruc	tion Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 6/26 Rpt: 9/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commission 00055268	on Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$1,000.00
_	Dringing! aggr	Bastrop, TX 78602	Employer (See Instruction			
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	is)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (IE Cooper, Mel  Contributor address; City; State; Zip Code	) :		Amount of Contribution (\$)	\$30.00
	Principal occur	Bastrop, TX 78602 pation / Job title (See Instructions)	Employer (See Instructions			
	Retired	valion / Job title (See instructions)	Employer (See Instructions	15)		
	Date 10/28/2023	Full name of contributor out-of-state PAC (IE Courtney, Curtis  Contributor address; City; State; Zip Code	) 		Amount of Contribution (\$)	\$20.00
		Elgin, TX 78621				
	Principal occu Owner	oation / Job title (See Instructions)	Employer (See Instructions	is)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (IE Courtney, Curtis  Contributor address; City; State; Zip Code  Elgin, TX 78621	)		Amount of Contribution (\$)	\$83.00
	Principal occu Owner	oation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (IE Cruz, Joe  Contributor address; City; State; Zip Code  Cedar Creek, TX 78612	) #:)		Amount of Contribution (\$)	\$75.00
	Principal occu Disabled Vet	oation / Job title (See Instructions) eran	Employer (See Instructions	ns)		
			•			

	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDU	LE A1
	The Instruc	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 7/26 Rpt: 10/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commissi 00055268	on Filers)
4	Date 10/28/2023	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$10.00
8	Principal occur	Elgin, TX 78621 pation / Job title (See Instructions)	9 Employer (See In	etructions)		
0	President	oation / Job title (See Instructions)	S Employer (See in	structions)		
	Date 09/23/2023	Contributor address; City; State; Zip Code	ID#:		Amount of Contribution (\$)	\$1,500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See In	structions)		
	Sen Schwert	ner		-		
	Date 09/23/2023	Full name of contributor out-of-state PAC Cunningham, Robert  Contributor address; City; State; Zip Code	ID#:		Amount of Contribution (\$)	\$200.00
		Cedar Creek, TX 78612				
	Principal occu Chemical Co	pation / Job title (See Instructions) nsultant	Employer (See In	structions)		
	Date 09/23/2023	Full name of contributor out-of-state PAC Cunningham, Robert  Contributor address; City; State; Zip Code  Cedar Creek, TX 78612	ID#:	)	Amount of Contribution (\$)	\$1,520.00
	Principal occu Chemical Co	oation / Job title (See Instructions) nsultant	Employer (See In	structions)		
	Date 09/23/2023	Full name of contributor out-of-state PAC Cunningham, Robert  Contributor address; City; State; Zip Code  Cedar Creek, TX 78612	ID#:	)	Amount of Contribution (\$)	\$20.00
	Principal occu Chemical Co	pation / Job title (See Instructions)	Employer (See In	structions)		
	3					

	MONETARY POLITICAL CONTRIBUTIONS		SCHEDUI	E A1
	The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 8/26 Rpt: 11/75	
2	Pastrop County Republican Party	3	Filer ID (Ethics Commission 00055268	on Filers)
4	Date 09/23/2023  5 Full name of contributor out-of-state PAC (ID#: Curtis, Gena 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$)	\$750.00
8	Principal occupation / Job title (See Instructions) *unknown  9 Employer (See In	structions)		
	Date Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	\$50.00
	Principal occupation / Job title (See Instructions)  *unknown  Employer (See Instructions)	structions)		
	Date Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	\$350.00
	Principal occupation / Job title (See Instructions)  *unknown  Employer (See In	structions)		
	Date Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	\$100.00
	Principal occupation / Job title (See Instructions)  *unknown  Employer (See Instructions)	structions)		
	Date Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$1,000.00
	Principal occupation / Job title (See Instructions)  Retired  Employer (See In	structions)		
	•			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 9/26 Rpt: 12/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commission 00055268	on Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$350.00
8	Principal occur	Elfin, TX 75621 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Retired	oalion7 Job title (See Instructions)	e Employer (See Instructions	')		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Durant, Michael  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00
	Principal occu *unknown	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 09/23/2023	Full name of contributor  out-of-state PAC (ID#:			Amount of Contribution (\$)	\$70.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/11/2023	Full name of contributor out-of-state PAC (ID#: Ervin-Cannon, Christina  Contributor address; City; State; Zip Code  Bastrop, TX 78602	)		Amount of Contribution (\$)	\$20.00
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Fitzpatrick, Leslie  Contributor address; City; State; Zip Code  Cedar Creek, TX 78612	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu *unknown	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIB	UTION	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete	e this for	rm.	1	Total pages Schedule A1: Sch: 10/26 Rpt: 13/75	
2	FILER NAME Bastrop Cou	nty Republican Party			3	Filer ID (Ethics Commissio 00055268	n Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor  out-of-state P Fulcher, Ann</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$75.00
_	Daine in a la casa	Smithville, TX 78957	l <sub>o</sub>	Facelouse (October Notice )	$\overline{\Gamma}$		
8	Real Estate	pation / Job title (See Instructions) Agent	9	Employer (See Instructions	5)		
	Date 09/23/2023	Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$85.00
		Smithville, TX 78957 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Real Estate	Agent					
	Date 09/23/2023	Full name of contributor	PAC (ID#:			Amount of Contribution (\$)	\$200.00
	Principal occu Retired Milita	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 09/23/2023	Full name of contributor out-of-state P Gambino, Joseph Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$885.00
	Principal occu Retired Milita	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 09/23/2023	Full name of contributor out-of-state P Gardner, Ty  Contributor address; City; State; Zip Code  Austin, TX 78750		)		Amount of Contribution (\$)	\$200.00
	Principal occu Marketing	oation / Job title (See Instructions)		Employer (See Instructions	s)		
			•				

	MONET	ARY POLITICAL CONTR	RIBUTIONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to comp	lete this form.	1	Total pages Schedule A1: Sch: 11/26 Rpt: 14/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commissio 00055268	n Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor  out-of-st</li> <li>Gardner, Ty</li> <li>Contributor address; City; State; Zip Cod</li> </ul>		7	Amount of Contribution (\$)	\$125.00
		Austin, TX 78750				
8	Principal occu Marketing	pation / Job title (See Instructions)	<b>9</b> Employer (	(See Instructions)		
	Date 09/23/2023	Full name of contributor out-of-st Gibson, Mary Contributor address; City; State; Zip Cod	ate PAC (ID#:		Amount of Contribution (\$)	\$45.00
	Principal occu *unknown	oation / Job title (See Instructions)	Employer (	See Instructions)		
	Date 09/23/2023	Glass, Tom	ate PAC (ID#:		Amount of Contribution (\$)	\$200.00
_	Principal occu	McDade, TX 78650 Dation / Job title (See Instructions)	Employer (	See Instructions)		
	Retired					
	Date 09/23/2023	Gogolewski, Jeffrey  Contributor address; City; State; Zip Co	ate PAC (ID#:		Amount of Contribution (\$)	\$200.00
	Principal occu Sergent Inve	Paige, TX 78659  pation / Job title (See Instructions)	Employer (	(See Instructions)		
	Date 09/23/2023	Full name of contributor out-of-st	ate PAC (ID#:		Amount of Contribution (\$)	\$110.00
	Principal occu Sergent Inve	pation / Job title (See Instructions) stigator	Employer (	(See Instructions)		
			<u>'</u>			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/26 Rpt: 15/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commission 00055268	n Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$75.00
8	Principal occu *unknown	TX pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:_ Greenwood, Dianna  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$80.00
	Principal occu *unknown	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:_ Griffor, Ken Contributor address; City; State; Zip Code  TX			Amount of Contribution (\$)	\$100.00
	Principal occu *unknown	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/28/2023	Full name of contributor out-of-state PAC (ID#:_ Grihg, Kiefer Contributor address; City; State; Zip Code  Austin, TX 78733			Amount of Contribution (\$)	\$10.00
	Principal occu Cashier	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:_ Grizzaffi, Nancy Contributor address; City; State; Zip Code Cedar Creek, TX 78612			Amount of Contribution (\$)	\$150.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	etion Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 13/26 Rpt: 16/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commission 00055268	n Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$360.00
8	Dringing agou	Bastrop, TX 78612	Employer (See Instructions	·/		
0	*unknown	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Hargis, Lucy  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
		Cedar Creek, TX 78602	1	<u></u>		
	Bookkeeper	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Harrod, Steve  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00
		Elgin, TX 78621				
	Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Harrod, Steve Contributor address; City; State; Zip Code  Elgin, TX 78621	)		Amount of Contribution (\$)	\$130.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Hester, Jim  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$161.00
	Principal occu *unknown	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBU	JTIONS		SCHEDUL	E <b>A1</b>
	The Instruc	etion Guide explains how to complete t	this form.	1	Total pages Schedule A1: Sch: 14/26 Rpt: 17/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commissio 00055268	n Filers)
4		<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$75.00
_		Bastrop, TX 78602	<u> </u>			
8	Principal occu *unknown	pation / Job title (See Instructions)	9 Employer (See Instruction	ons)		
	Date 09/23/2023	Full name of contributor out-of-state PAC Hinkston, Bill Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$100.00
	Dringing! aggr	Bastrop, TX 78602	Employer (Coo Instruction			
	*unknown	pation / Job title (See Instructions)	Employer (See Instruction	ons)		
	Date 09/23/2023	Full name of contributor out-of-state PAC Humphrey, Robert  Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$150.00
		Elgin, TX 78621				
	Principal occu Exec Consul	pation / Job title (See Instructions) cant	Employer (See Instruction	ons)		
	Date 09/23/2023	Full name of contributor out-of-state PAC Humphrey, Robert  Contributor address; City; State; Zip Code  Elgin, TX 78621	C (ID#:)		Amount of Contribution (\$)	\$12.00
	Principal occu Exec Consul	pation / Job title (See Instructions)	Employer (See Instruction	ons)		
	Date 09/23/2023	Full name of contributor	C (ID#:)		Amount of Contribution (\$)	\$20.00
	Principal occu *unknown	oation / Job title (See Instructions)	Employer (See Instruction	ons)		
			•			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 15/26 Rpt: 18/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commission 00055268	n Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Johnson, Irma</li> <li>Contributor address; City; State; Zip Code</li> </ul>	_	7	Amount of Contribution (\$)	\$150.00
8	Principal occur	Bastrop, TX 78602 pation / Job title (See Instructions)	9 Employer (See Instructions	·)		
0	Interior Desig		5 Employer (See instructions	·)		
	Date 09/23/2023	Full name of contributor  out-of-state PAC (ID#: Johnson, Michael  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$55.00
		Bastrop, TX 78602	1	<u> </u>		
	Aerospace E	pation / Job title (See Instructions) ngineeer	Employer (See Instructions	s)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Jones, Diana  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00
		Cedar Creek, TX 78612				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Kellar, Bobby  Contributor address; City; State; Zip Code	)	•	Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Kelsay, Doug  Contributor address; City; State; Zip Code  Bastrop, TX 78602			Amount of Contribution (\$)	\$300.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 16/26 Rpt: 19/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commission 00055268	on Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor</li></ul>	_	7	Amount of Contribution (\$)	\$275.00
_	Driveries I	Bastrop, TX 78602	le Frankrik (On Instruction			
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Kirkland, John  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$200.00
	Principal occu	Bastrop, TX 78602 pation / Job title (See Instructions)	Employer (See Instructions	 ;)		
	Principal Eng			<u></u>		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Kocian, Ron  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00
		Cedar Creek, TX 78612				
	Principal occu Landscaper	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/16/2023	Full name of contributor out-of-state PAC (ID#: LPRW  Contributor address; City; State; Zip Code  Bastrop, TX 78602	)		Amount of Contribution (\$)	\$140.00
	Principal occu *unknown	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor  out-of-state PAC (ID#: Layland, David  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$4,600.00
	Principal occu *unknown	oation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/26 Rpt: 20/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commission 00055268	n Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:_ Lewis, Reed Contributor address; City; State; Zip Code  Bastrop, TX 78602			Amount of Contribution (\$)	\$75.00
	Principal occu Credit Analyi	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/23/2023	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$285.00
	Principal occu	Bastrop, TX 78602 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:_ Long, Sue Contributor address; City; State; Zip Code  Bastrop, TX 78602	)		Amount of Contribution (\$)	\$150.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:_Martinez, Cathy  Contributor address; City; State; Zip Code  Bastrop, TX 78602			Amount of Contribution (\$)	\$150.00
	Principal occu Teacher	pation / Job title (See Instructions)	Employer (See Instructions	· )		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 18/26 Rpt: 21/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commissio 00055268	n Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$200.00
8	Principal occur	Smithville, TX 78957 pation / Job title (See Instructions)	9 Employer (See Instructions	;) 		
_	Attorney	salon, cos une (coe mondono)	2 Employer (eee meadeans	<i>''</i>		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: McMillen, Russell  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu *unknown	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Miller, Tina  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$750.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>l</u> s)		
	Date 09/23/2023	Full name of contributor			Amount of Contribution (\$)	\$90.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>l</u> 5)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Moore, Scott  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$350.00
	Principal occu *unknown	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 19/26 Rpt: 22/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commission 00055268	n Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Elgin, TX 78621 pation / Job title (See Instructions)	9 Employer (See Instructions	 s)		
	Claims Litiga					
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID# Moseley, Rebecca Contributor address; City; State; Zip Code	<u>;                                    </u>		Amount of Contribution (\$)	\$100.00
	Principal occur	Elgin, TX 78621 pation / Job title (See Instructions)	Employer (See Instructions	<u>=,</u>		
	Claims Litiga		Employer (See instructions	>)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID# Nelson, Jim  Contributor address; City; State; Zip Code	÷)		Amount of Contribution (\$)	\$200.00
		Smithville, TX 78957				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID# Nelson, Jim  Contributor address; City; State; Zip Code  Smithville, TX 78957	<u>;                                    </u>		Amount of Contribution (\$)	\$240.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID# Newman, Joe  Contributor address; City; State; Zip Code  Ennis, TX 75119	<u>:</u> )		Amount of Contribution (\$)	\$75.00
	Principal occu Retired	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 20/26 Rpt: 23/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commission 00055268	on Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Smithville, TX 78957 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	Tax Collecto			,		
	Date 09/23/2023	Full name of contributor  out-of-state PAC (ID#:_ Page, James Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00
	Dianiant	Rosanky, TX 78953	Formula van (Oa a la atmustia a	_		
	Retired	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Page, James Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00
		Rosanky, TX 78953				
	Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,500.00
	Principal occup	nation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#: Price, Jim  Contributor address; City; State; Zip Code  Paige, TX 78659			Amount of Contribution (\$)	\$200.00
	Principal occu Owner	oation / Job title (See Instructions)	Employer (See Instructions	)		
		,				

	MONET	ARY POLITICAL CONTRIBU	JTIONS	SCHEDULE A1
	The Instruc	etion Guide explains how to complete	this form.	1 Total pages Schedule A1: Sch: 21/26 Rpt: 24/75
2	FILER NAME Bastrop Cou	nty Republican Party		3 Filer ID (Ethics Commission Filers) 00055268
4	· · · · · · · · · · · · · · · · · · ·	<ul> <li>Full name of contributor</li></ul>		7 Amount of Contribution (\$) \$50.00
_		Paige, TX 78659	<u> </u>	
8	Principal occu Owner	pation / Job title (See Instructions)	9 Employer (See Instructions	ns)
	Date 09/23/2023	Full name of contributor out-of-state PAG Richard, James  Contributor address; City; State; Zip Code	C (ID#:)	Amount of Contribution (\$)
	Dringing aggr	Bastrop, TX 78602	Employer (See Instruction	nc)
	Retired Nurs	pation / Job title (See Instructions)	Employer (See Instructions	115)
	Date 09/23/2023	Full name of contributor out-of-state PAG Rush, Renee Contributor address; City; State; Zip Code	C (ID#:)	Amount of Contribution (\$)
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)
	Date 09/23/2023	Full name of contributor out-of-state PAG Schroeder, Connie Contributor address; City; State; Zip Code Bastrop, TX 78602	C (ID#:)	Amount of Contribution (\$)
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	ns)
	Date 09/23/2023	Full name of contributor out-of-state PAG Scott, Damon Contributor address; City; State; Zip Code	iC (ID#:)	Amount of Contribution (\$)
	Principal occu Director of S	oation / Job title (See Instructions) ales	Employer (See Instructions	ns)
			<u> </u>	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 22/26 Rpt: 25/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commission 00055268	on Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$130.00
8	Principal occu	78612 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> s)		
	Director of S		, ,, ,	,		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID# Simpson, Kim Contributor address; City; State; Zip Code	:)	•	Amount of Contribution (\$)	\$50.00
	Principal occu *unknown	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/23/2023	Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Cedar Creek, TX 78612 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID# Spruce, Susan Dickerson  Contributor address; City; State; Zip Code  Bastrop, TX 78602	:)		Amount of Contribution (\$)	\$150.00
	Principal occu Real Estate	pation / Job title (See Instructions) nvestor	Employer (See Instructions	5)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID# Spruce, Susan Dickerson  Contributor address; City; State; Zip Code  Bastrop, TX 78602			Amount of Contribution (\$)	\$115.00
	Principal occu Real Estate	pation / Job title (See Instructions) nvestor	Employer (See Instructions	5)		
			•			

	MONET	ARY POLITICAL CON	NTRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to c	complete this form	n.	1	Total pages Schedule A1: Sch: 23/26 Rpt: 26/75	
2	FILER NAME Bastrop Cou	nty Republican Party			3	Filer ID (Ethics Commission 00055268	on Filers)
4	Date 09/23/2023	5 Full name of contributor on Swinney, Brenda	ut-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$1,000.00
_	Deirectional	Paige, TX 78659	la la	Farabasa (Osabasa tarati			
8	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions	)		
	Date 09/23/2023	Swinney, Brenda  Contributor address; City; State; Z	ut-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$115.00
	Principal occu	Paige, TX 78659  Dation / Job title (See Instructions)		Employer (See Instructions	)		
	Retired						
	Date 09/23/2023	Full name of contributor on one of Swinney, Brenda  Contributor address; City; State; Z	ut-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$100.00
		Paige, TX 78659					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 09/23/2023	Synnott, Glenn				Amount of Contribution (\$)	\$250.00
	Principal occu *unknown	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 11/18/2023	Thompson, Dawn	ut-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$120.00
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions	)		
			ı				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 24/26 Rpt: 27/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commission 00055268	on Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$3,500.00
_	5	Rosanky, TX 78953		_		
8	Owner	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:_ Thompson, Dawn Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$800.00
	Drincinal occu	Rosanky, TX 78953 pation / Job title (See Instructions)	Employer (See Instructions			
	Owner	Jation / Job title (See matrictions)	Employer (See instructions	')		
	Date 09/23/2023	Full name of contributor  out-of-state PAC (ID#:_ Till, Benjamin  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$20.00
		TX				
	Principal occu *unknown	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:_ Timms, Jeffrey  Contributor address; City; State; Zip Code  Bastrop, TX 78602	)		Amount of Contribution (\$)	\$100.00
	Principal occu Retired Polic	oation / Job title (See Instructions) e Officer	Employer (See Instructions	)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:_ Torrey, Mark L Contributor address; City; State; Zip Code  Red Rock, TX 78662			Amount of Contribution (\$)	\$1,500.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBU	JTIONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete t	this form.	1	Total pages Schedule A1: Sch: 25/26 Rpt: 28/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commission 00055268	n Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor  out-of-state PAC Torrey, Mark L</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$450.00
_		Red Rock, TX 78662		Ĺ		
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 09/23/2023	Full name of contributor out-of-state PACTUIly, Anna Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$60.00
	Principal occu *unknown	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 09/23/2023	Full name of contributor out-of-state PAC Turner, Ariston Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$300.00
	Principal occu	Lexington, TX 78947 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	*unknown			-,		
	Date 09/23/2023	Full name of contributor out-of-state PAC Turner, Michael  Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$220.00
	Principal occu *unknown	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		
	Date 09/23/2023	Full name of contributor out-of-state PAC Watts, Beverly Contributor address; City; State; Zip Code  Bastrop, TX 78602	C (ID#:)		Amount of Contribution (\$)	\$75.00
	Principal occu Premium Se	pation / Job title (See Instructions) vices	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete thi	is form.	1	Total pages Schedule A1: Sch: 26/26 Rpt: 29/75	
2	FILER NAME Bastrop Cou	nty Republican Party		3	Filer ID (Ethics Commission 00055268	n Filers)
4	Date 09/23/2023	<ul> <li>Full name of contributor  out-of-state PAC (I Weller, David</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$100.00
8	Principal occur	Del Valle, TX 78617 pation / Job title (See Instructions)	9 Employer (See Instructions	c)		
0	Production T		employer (See Instructions	3)		
	Date 09/23/2023	Full name of contributor  out-of-state PAC (I Wendel, Susan  Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$100.00
	Dringing Lagor	Bastrop, TX 78602	Franksian (Coo Instructions	<u>-</u>		
	Retired	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (I Wyatt, Mark  Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$32.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>l</u> s)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (I Wyatt, Shari  Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$150.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> s)		
	Date 09/23/2023	Full name of contributor out-of-state PAC (I Yashchuk, Andrew  Contributor address; City; State; Zip Code  Austin, TX 78749	D#:)		Amount of Contribution (\$)	\$100.00
	Principal occu *unknown	oation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/16 Rpt: 30/75
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Bastrop Cou	unty Republican Party		00055268
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
<b>5</b> Date	6 Full name of contributor  ut-of-state PAC (ID#:		8 Amount of 9 In-kind contribution contribution (\$) description
09/23/2023			contribution (\$) description \$25.00 I
	7 Contributor address; City; State; Zip Code		
	Bastrop, TX 78602		Check if travel outside of Texas. Complete Schedule T
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	
12 Constribute de	principal occupation (FOR JUDICIAL)	12 Comatrillo de una inde dida	(FOR JUDICIAL) (See instructions)
12 Continutors	principal occupation (FOR JODICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•	
Date	Full name of contributor  out-of-state PAC (ID#:	)	Amount of In-kind contribution
09/23/2023	Anna Kraft Fine Art Portrait		contribution (\$) description \$1,500.00 l
	Contributor address; City; State; Zip Code		\$1,500.001 
	Georgetown, TX 78626		_
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T  J-JUDICIAL) (See instructions)
i ilicipai occi	apation / 30b title (1 OK NON 30b)c(AL)	Employer (FOR NOR	(Sobietial)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
if a subside of a second	in a hild law firm of a good (a) (form) (FOD JUDIOIAL)		
if contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of In-kind contribution
09/23/2023	Full name of contributor out-of-state PAC (ID#: Barron, Donald		contribution (\$) description
00/20/2020	Contributor address; City; State; Zip Code		\$750.00
	30.11.13.11.0.1 at al. 1300, 13.13, 13.11.15, 2.15		
			į į
	TX		Check if travel outside of Texas. Complete Schedule T
· ·	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
?Unknown	rein single account for (EOD NIDIOIAL)	O a manife a de ante de la distre	(FOR AUDIOIAL) (Continue time)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
			-
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

SCHEDULE A	Z
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The Instru	ection Guide explains how to complete this f	form.	1 Total pages Schedule A2: Sch: 2/16 Rpt: 31/75
2 FILER NAME	:		3 Filer ID (Ethics Commission Filers)
	unty Republican Party		00055268
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
<b>5</b> Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution
09/23/2023	Barron, Donald		contribution (\$) description
	7 Contributor address; City; State; Zip Code		.  \$750.00 I 
			!
	TX		Check if travel outside of Texas. Complete Schedule T.
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)
?Unknown			
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor  ut-of-state PAC (ID#:		Amount of ! In-kind contribution
09/23/2023		)	contribution (\$) description
03/23/2023	Bascom Hodges Pest Control		\$100.00
	Contributor address; City; State; Zip Code		
			<u> </u>
	Bastrop, TX 78602		m i
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T.  J-JUDICIAL) (See instructions)
i iiicipai occi	apation, our title (i of Nort our interest in its	Limployer (i Ort Nort	( Cooling)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributors	principal occupation (1 or toobion/L)	Contributor 3 job title	(I OT GODION L) (God mondons)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Contributors	employer/law lifth (FOR SODICIAE)	Law IIIII of Contribute	or a spouse (ii arry) (i or aobicine)
If contributor	is a shild low firm of parant(s) (if any) (FOR HIDICIAL)		
ii contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution contribution (\$) description
09/23/2023	Bastrop County Conservatives		\$50.001
	Contributor address; City; State; Zip Code		
			i
			_
	Bastrop, TX 78602	•	Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2:
	-		Sch: 3/16 Rpt: 32/75
2 FILER NAME Bastron Cou	unty Republican Party		<b>3</b> Filer ID (Ethics Commission Filers) 00055268
4			
TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	<b>\$</b>
<b>5</b> Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution contribution (\$) description
09/23/2023	Beck, Sue		\$80.001
	7 Contributor address; City; State; Zip Code		
			į į
	Cedar Creek, TX 78612		l 🗖
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	LI Check if travel outside of Texas. Complete Schedule -JUDICIAL) (See instructions)
Retired	ppadon / oco due (i orchest cobie), (com com co	n/a	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
	,	,	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution
09/23/2023	Billys BarBQ		contribution (\$) description
	Contributor address; City; State; Zip Code		\$38.00 I I
	Bastrop, TX 78602	ī	Check if travel outside of Texas. Complete Schedule
Principal occı	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
Caratrilar stanla	principal accompation (FOR HIDIOIAL)	Constributorio inh sisto	(FOR HIDICIAL) (Conjuntriations)
Contributors	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Contributor 3	employemaw iiiii (i ort oobioii L)	Law min or contribute	is a special (ii arry) (i circ de bioline)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
ii continuator	o a oma, fair min or parom(o) (if any) (i or coolion iz)		
Date	Full name of contributor out-of-state PAC (ID#:	١	Amount of In-kind contribution
09/23/2023	Carlisle, Glenn		contribution (\$) description
	Contributor address: City; State; Zip Code		\$600.00
			į
	Cedar Creek, TX 78612		Check if travel outside of Texas. Complete Schedule
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
Retired			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
14	the shift have former for the state of the s		
if contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

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The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A2: Sch: 4/16 Rpt: 33/75	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Bastrop Cou	unty Republican Party		00055268	
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$		
5 Date	6 Full name of contributor  ut-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution	
09/23/2023	Casa Chapala		contribution (\$) description \$50.00 l	
	7 Contributor address; City; State; Zip Code			
			i	
	Pactron TV 70602		_	
10 Principal occu	Bastrop, TX 78602  upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	L Check if travel outside of Texas. Complete Schedule T  J-JUDICIAL) (See instructions)	
10 Filicipal occi	apation 7 300 title (POR NON-30DICIAL) (See institutions)	11 Employer (FOR NON	-JODICIAL) (See instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
16 ii contributor i	is a child, law lifth of parefuls) (if any) (FOR JODICIAL)			
Dette	Full account of contributes.		L American L In Bind a satisfaction	
Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution contribution (\$) description	
09/23/2023	Casper, Kim		\$100.00	
	Contributor address; City; State; Zip Code			
	Cedar Creek, TX 78612		Check if travel outside of Texas. Complete Schedule T	
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON		
Contractor		Self Employed		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
			T	
Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution contribution (\$) description	
09/23/2023	Cedars		\$100.00	
	Contributor address; City; State; Zip Code			
	Bastrop, TX 78602		Check if travel outside of Texas. Complete Schedule T	
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)	
Contributor's	Contributor's employer/law firm (FOR JUDICIAL)  Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A2: Sch: 5/16 Rpt: 34/75		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Bastrop Cou	unty Republican Party		00055268		
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$			
5 Date	6 Full name of contributor  out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution		
09/23/2023	Cherry Blossom		contribution (\$) description		
	7 Contributor address; City; State; Zip Code		,		
			i		
	B TV 70000				
40.00	Bastrop, TX 78602	T4 5 1 (505 NO.	Check if travel outside of Texas. Complete Schedule	э Т.	
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)		
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
<b>16</b> If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor  ut-of-state PAC (ID#:		Amount of In-kind contribution		
09/23/2023	Coffee Dog		contribution (\$) description \$90.00 I		
	Contributor address; City; State; Zip Code		, \$50.001 I		
			i		
	Dectron TV 70002				
Driveigal	Bastrop, TX 78602	Francis von (FOR NON	Check if travel outside of Texas. Complete Schedule	э Т.	
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributors	principal occupation (i on ooblonic)	Contributor 3 job title	(I ON GODION L) (GGG meadeaster)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)	_	
	,,				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1		_	
Date	Full name of contributor  ut-of-state PAC (ID#:	Λ.	Amount of ! In-kind contribution	_	
09/23/2023	Cola Vista Golf		contribution (\$) description		
	Contributor address; City; State; Zip Code		\$160.00		
	Continuation address, City, State, 21p code		į		
			i		
	Bastrop, TX 78602		Check if travel outside of Texas. Complete Schedule	e T.	
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributor's	Contributor's employer/law firm (FOR JUDICIAL)  Law firm of contributor's spouse (if any) (FOR JUDICIAL)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

The Instru	ction Guide explains how to complete this 1	form.	1 Total pages Schedule A2: Sch: 6/16 Rpt: 35/75	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
	unty Republican Party		00055268	
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	SUTIONS	\$	
<b>5</b> Date	6 Full name of contributor  out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution	
09/23/2023	Community Gardens		contribution (\$) description \$100.00 I	
	7 Contributor address; City; State; Zip Code		,	
			i i	
			l _	
	Bastrop, TX 78602		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor out-of-state PAC (ID#:		Amount of ! In-kind contribution	
09/23/2023	Cook, Maurice		contribution (\$) description	
03/20/2020			\$25.00	
	Contributor address; City; State; Zip Code		i	
			<u> </u>	
	Bastrop, TX 78602		Check if travel outside of Texas. Complete Schedule T.	
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON		
Sheriff	,	Bastrop county	,	
	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)	
	p		(( - ( - ( - ( - ( - ( - ( - ( - ( - (	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>		
ii continuator	is a sima, law iiiii or parent(e) (ii ariy) (i ort oosion te)			
			I	
Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution contribution (\$) description	
09/23/2023	Doss, Damon		\$1,000.001	
	Contributor address; City; State; Zip Code		i i	
			ļ .	
	Elfin, TX 75621		ii	
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T.  J-JUDICIAL) (See instructions)	
Retired	apation 7 30b title (1 OK NON-30biolAL) (666 motions)	n/a	-JODICIAL) (See Institutions)	
	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)	
Continuutoi S	ριποιραί σοσαβαίιστι (ΓΟΝ ΙΟΙΝΙΟΙΑΕ)	Continuator s job title	(I OI JODICIAL) (See instituctions)	
Contributor's	Contributor's employer/law firm (FOR JUDICIAL)  Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
Continuators	employer, law tilli (i Ort JobioiAL)	Law iiiii oi contiibutt	or a apouse (ii uriy) (i or aobicine)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>		
ii continuttor	is a simu, iaw iiiiii oi paietii(s) (ii aiiy) (FOR JODICIAL)			
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The Instruction Guide explains how to complete this form.			1 Total pages Scl Sch: 7/16 Rpt		
2 FILER NAME			3 Filer ID (Ethic	s Commission Filers)	
Bastrop County Republican Party			00055268		
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS			\$		
5 Date 6 Full name of contributor out-of-state PAC (ID#:		)	8 Amount of 9 In-kind contribution		
			contribution (\$)	` '	
			\$24.001		
				-   	
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Round Rock, TX 78680			Check if travel of	l outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FC			-JUDICIAL) (See ii	nstructions)	
Retired					
12 Contributor's principal occupation (FOR JUDICIAL) 13		13 Contributor's job title (FOR JUDICIAL) (See instructions)			
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
<b>16</b> If contributor is a child, law firm of	f parent(s) (if any) (FOR JUDICIAL)				
Date Full name of co	ontributor out-of-state PAC (ID#:	)	Amount of	In-kind contribution	
09/23/2023 Fat Cat Lounge			contribution (\$) description \$75.00 I		
Contributor add	lress; City; State; Zip Code		\$75.00	i I	
				] 	
Smithville, TX 78957			Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (F	OR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See ii	nstructions)	
	(======================================		/	(0	
Contributor's principal occupation	(FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL)	(See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
Contributor's employer/law lirm (	FOR JUDICIAL)	Law IIIm of Contributo	ir's spouse (ii ariy) (	FOR JUDICIAL)	
If contributor is a shild low firm of	f parant(a) (if any) (EQD 11DICIAL)				
ii contributor is a chiid, iaw iirm c	f parent(s) (if any) (FOR JUDICIAL)				
			Amount of In-kind contribution contribution (\$) description		
09/23/2023 Gerdes, Stan			\$400.00		
Contributor add	Iress; City; State; Zip Code			] ]	
				  -	
Smithville, T	78957			! 	
	OR NON-JUDICIAL) (See instructions)	Employer (FOR NON		outside of Texas. Complete Schedule T. nstructions)	
State Representative		Representative Stan Gerdes			
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)			
Contributor 3 principal occupation	r (r er debien.e)	Contributor 3 job title	(1 01( 0001011/12)	(000 11101110110)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
2 State Stat		20.1 01 00111110110	opouco (ii uiiy) (		
If contributor is a child, law firm o	of parent(s) (if any) (EOP JUDICIAL)	1			
	ii paieiii(3) (ii aiiv) (FOR JUDICIA) i				
	i parerius) (ii arry) (FOR JODICIAL)				

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2: Sch: 8/16 Rpt: 37/75	
2 FILER NAME	<u> </u>		3 Filer ID (Ethics Commission Filers)	
Bastrop Cou	unty Republican Party		00055268	
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	
<b>5</b> Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution	
09/23/2023	Golden Girl's Boutique		contribution (\$) description	
	7 Contributor address; City; State; Zip Code		\$50.00 I	
			į į	
	Smithville, TX 78957	1	Check if travel outside of Texas. Complete Schedule T.	
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor  out-of-state PAC (ID#:	)	Amount of In-kind contribution	
09/23/2023	HT Fitness		contribution (\$) description	
	Contributor address; City; State; Zip Code		\$99.00	
	Communication address, City, State, Zip Code		į	
Bastrop, TX 78602			Check if travel outside of Texas. Complete Schedule T.	
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution	
09/23/2023	Hyatt Golf Course		contribution (\$) description	
	Contributor address; City; State; Zip Code		\$512.00 I	
	, , , ,			
			į	
	Cedar Creek, TX 78612		Check if travel outside of Texas. Complete Schedule T.	
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)  Law firm of contributor's spouse (if any) (FOR JUDICIAL)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•		

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2: Sch: 9/16 Rpt: 38/75		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Bastrop Cou	unty Republican Party		00055268		
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	SUTIONS	\$		
<b>5</b> Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution		
09/23/2023	1 Rolowy, Boug		contribution (\$) description		
	7 Contributor address; City; State; Zip Code		. \$200.00 I I		
	Bastrop, TX 78602		Check if travel outside of Texas. Complete Schedule T		
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)		
Retired		n/a			
<b>12</b> Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	<b>15</b> Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
<b>16</b> If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor  ut-of-state PAC (ID#:	)	Amount of In-kind contribution		
09/23/2023	Kimmie Jean Boutique		contribution (\$) description		
	Contributor address; City; State; Zip Code				
	Smithville, TX 78957		_ ;		
Principal occu		Employer (EOR NON	Check if travel outside of Texas. Complete Schedule T  J-JUDICIAL) (See instructions)		
Fillicipal occi	Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions)				
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Continuations	principal decapation (i dividebion L)	Contributor 5 job title	(1 01( 002) 011 (2)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>			
Date	Full name of contributor out-of-state PAC (ID#:		Amount of In-kind contribution		
09/23/2023	Kirby, Chris	)	contribution (\$) description		
00/20/2020	Contributor address; City; State; Zip Code		\$500.00		
	Continuator address, City, State, 21p code				
Bastrop, TX 78602			Check if travel outside of Texas. Complete Schedule T		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (F					
Attorney		Tucker Law Group	, PLLC		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)  Law firm of co			or's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2: Sch: 10/16 Rpt: 39/75	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Bastrop Cou	unty Republican Party		00055268	
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	
<b>5</b> Date	6 Full name of contributor  ut-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution	
09/23/2023	Leos		contribution (\$) description \$25.00 l	
	7 Contributor address; City; State; Zip Code		1	
			į	
	Cedar Creek, TX 78612		l 🗖i	
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	LJUDICIAL) (See instructions)	
		22 Employer (For Norv	(Constant)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor  ut-of-state PAC (ID#:	)	Amount of In-kind contribution contribution (\$) description	
09/23/2023	Loose Cannon		\$1,000.001	
	Contributor address; City; State; Zip Code			
			į į	
	Cedar Creek, TX 78612		l 🗖 i	
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T.  -JUDICIAL) (See instructions)	
i ililoipai occi	apadion 7 dob dide (1 dix 14dix dobion/le) (eee memers)	Employer (FOR NOR	(000,000,000,000,000,000,000,000,000,00	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)	
	,	,		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	I		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution	
09/23/2023	Lost Pines Car Wash		contribution (\$) description	
	Contributor address; City; State; Zip Code		\$90.001	
			<u> </u>	
			į	
Bastrop, TX 78602			Check if travel outside of Texas. Complete Schedule T.	
Principal occı	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
l				

The Instru	iction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 11/16 Rpt: 40/75			
2 FILER NAME	<u> </u>		3 Filer ID (Ethics Commission Filers)		
Bastrop Co	unty Republican Party		00055268		
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		
<b>5</b> Date	6 Full name of contributor  out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution		
09/23/2023	Local indo dicanore		contribution (\$) description \$50.00 I		
	7 Contributor address; City; State; Zip Code				
			į į		
	Bastrop, TX 78602		- ;		
10 Principal acc	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T.  J-JUDICIAL) (See instructions)		
10 Pilicipal occi	upation 7 300 title (FOR NON-30DICIAL) (See instructions)	11 Employer (FOR NON	-JODICIAL) (See instructions)		
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
<b>16</b> If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor  ut-of-state PAC (ID#:	)	Amount of In-kind contribution		
09/23/2023	Made by Mary Kate		contribution (\$) description \$50.00 I		
	Contributor address; City; State; Zip Code		1		
			i		
Pastron TV 79602					
Bastrop, TX 78602			Check if travel outside of Texas. Complete Schedule T.		
Principal occ	Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions)				
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributors	principal occupation (FOR JODICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
Contributors	employer/law lifti (i OK 30DICIAL)	Law IIIII of Continuati	or a spouse (ii arry) (i or aobicine)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
ii contributor	is a clina, law inition parent(s) (if any) (if on sobletical)				
Data	Full manner of contributors		Amount of I to bind contribution		
Date 09/23/2023	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution contribution (\$) description		
09/23/2023	Malina, Lucy		\$80.001		
	Contributor address; City; State; Zip Code				
Bastrop, TX 78602			Check if travel outside of Toyon, Complete Schoolule T		
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T.  J-JUDICIAL) (See instructions)		
?Unknown	,		,		
	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
	, , , , , , , , , , , , , , , , , , , ,				
Contributor's employer/law firm (FOR JUDICIAL)  Law firm of contributor's spouse (if any) (FOR JUDICIAL)					
	,		,		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1			
•					

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2: Sch: 12/16 Rpt: 41/75	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
	unty Republican Party		00055268	
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	
<b>5</b> Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution	
09/23/2023	Martinez, Cathy		contribution (\$) description \$170.00 I	
	7 Contributor address; City; State; Zip Code		1 \$170.001   I	
			_	
	Bastrop, TX 78602	i	Check if travel outside of Texas. Complete Schedule T.	
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)	
Teacher		Self		
<b>12</b> Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)	
44.0	and a sellen from (EOD HIDIOIAL)	45 Lauréinea de autribut	ada annua (fam.) (FOR JUDIOIAL)	
14 Contributors	employer/law firm (FOR JUDICIAL)	15 Law IIIm of contribute	or's spouse (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
16 ii continuator	is a clinu, law little of paretiles) (if any) (FOR SODICIAL)			
Date	Full name of contributor  ut-of-state PAC (ID#:	)	Amount of In-kind contribution contribution (\$) description	
09/23/2023	Martinez, Cathy		\$20.001	
	Contributor address; City; State; Zip Code			
			į į	
	Bastrop, TX 78602		<sub> </sub>	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NO			Check if travel outside of Texas. Complete Schedule T.  J-JUDICIAL) (See instructions)	
Teacher	apadon / oob dide (i ork work ooblon ii) (eee measures)	Self	(0001011/12)	
	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)	
	,	,	,	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#:	1	Amount of In-kind contribution	
09/23/2023	Maxines		contribution (\$) description	
	Contributor address; City; State; Zip Code		\$100.00	
	, , , , , , , , , , , , , , , , , , ,			
			į	
Bastrop, TX 78602			Check if travel outside of Texas. Complete Schedule T.	
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)	
Contributor's	Contributor's principal occupation (FOR JUDICIAL)  Contributor's job title (FOR JUDICIAL) (See instructions)			
Contributor's employer/law firm (FOR JUDICIAL)  Law firm of contributor's spo			or's spouse (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

The Instruction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 13/16 Rpt: 42/75		
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Bastrop County Republican Party		00055268	
TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	
5 Date 6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution contribution (\$) description	
09/23/2023 Meuths Place	3 Meuths Place		
7 Contributor address; City; State; Zip Code		\$50.00 I	
		į	
Bastrop, TX 78602		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON-		
, , ,	, , ,	*	
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title (	FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Data Della consensation della Constitution D		Assessment to be being a contribution	
Date Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution contribution (\$) description	
09/23/2023 Miltons Furniture		\$40.001	
Contributor address; City; State; Zip Code		!	
		i	
		!	
Smithville, TX 78957		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions)			
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title (	FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date Full name of contributor Out-of-state PAC (ID#:		Amount of ! In-kind contribution	
	)	contribution (\$) description	
09/23/2023 Miltons Furniture		\$100.001	
Contributor address; City; State; Zip Code		!	
		i	
		l L	
Smithville, TX 78957	Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-	-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)	Contributor's principal occupation (FOR JUDICIAL)  Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)	
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)	
	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)	
Contributor's employer/law firm (FOR JUDICIAL)  If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)	
	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)	

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 14/16 Rpt: 43/75		
2 FILER NAME	: unty Republican Party		3 Filer ID (Ethics Commission Filers) 00055268	
4	anty Nepublican Faity		00033200	
TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	
5 Date 09/23/2023	Ola World Bakery	)	8 Amount of 9 In-kind contribution contribution (\$) description	
	7 Contributor address; City; State; Zip Code			
	Bastrop, TX 78602		Check if travel outside of Texas. Complete Schedule T.	
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	I		
Date	Full name of contributor  ut-of-state PAC (ID#:	)	Amount of In-kind contribution	
09/23/2023	Old World Bakery		contribution (\$) description \$50.00 l	
	Contributor address; City; State; Zip Code			
			į	
	Smithville, TX 78957			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR			Check if travel outside of Texas. Complete Schedule T.	
	,		,	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)	
Contributor's	Contributor's employer/law firm (FOR JUDICIAL)  Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution	
09/23/2023	Piney Creek Chop House		contribution (\$) description	
	Contributor address; City; State; Zip Code		\$100.001 	
			<u> </u>	
	Bastrop, TX 78602		Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions)			I-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)  Contributor's job title (FOR JUDICIAL) (See instructions)			(FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)  Law firm of contrib			or's spouse (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1		

SCHEDULE	ΑZ
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The Instru	ection Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 15/16 Rpt: 44/75			
2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
Bastrop Cou	unty Republican Party		00055268		
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		
5 Date	6 Full name of contributor  out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution		
09/23/2023	Rising Phoenix		contribution (\$) description \$200.00 I		
	7 Contributor address; City; State; Zip Code		1		
			i i		
	B		_		
40.00	Bastrop, TX 78602	las - (505.40)	Check if travel outside of Texas. Complete Schedule T.		
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)		
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor  out-of-state PAC (ID#:	)	Amount of In-kind contribution		
09/23/2023	Senator Schwertner		contribution (\$) description		
	Contributor address; City; State; Zip Code		- \$45.00 I I		
			!		
Georgetown, TX 78626			Check if travel outside of Texas. Complete Schedule T.		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions)					
	· · · · · · · · · · · · · · · · · · ·	0	(505 1151011) (0.1511115)		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Constributed	orania varila vi firma (FOD HIDICIAL)	Laurelinea of a setuiburt	and a province (if a pro) (EOD THIDICIAL)		
Contributors	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
If a protection story	is a shild law firms of source (a) (form) (FOR HIDIOIAL)				
if contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor  out-of-state PAC (ID#:	)	Amount of In-kind contribution contribution (\$) description		
09/23/2023	Senator Schwertner		\$400.001		
	Contributor address; City; State; Zip Code				
			į į		
Georgetown, TX 78626			mi		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T.  J-JUDICIAL) (See instructions)		
Fillicipal occi	apation / 300 title (FOR NON-30DICIAL)	Employer (FOR NON	-JODICIAL) (See instituctions)		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
	,				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)		
	,		, , , , , , , , , , , , , , , , , , , ,		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1			
	, , , , , , , , , , , , , , , , , , , ,				

#### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 16/16 Rpt: 45/75 2 FILER NAME 3 Filer ID (Ethics Commission Filers) **Bastrop County Republican Party** 00055268 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 09/23/2023 Thompson, Dawn \$200.00 i 7 Contributor address; City; State; Zip Code Rosanky, TX 78953 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) Best Friends Boarding Kennel Owner 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

#### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/30 Rpt: 46/75	Bastrop County Republican Party 00055268
4	Date	5 Payee name
	10/06/2023	Amazon
6	Amount (\$) \$82.81	7 Payee address; City; State; Zip Code 440 Terry Ave N Seattle, WA 98109
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Solicitation/Fundraising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Amazon-plates & napkins
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/01/2023	Amazon
	Amount (\$) \$65.52	Payee address; City; State; Zip Code 440 Terry Ave N Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Hogeye Festival
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/17/2023	Bastrop Chamber Of Commerce
	Amount (\$) \$170.00	Payee address; City; State; Zip Code 927 Main St
		Bastrop, TX 78602
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense Chamber of Commerce Dues
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/30 Rpt: 47/75	Bastrop County Republican Party 00055268
4	Date	5 Payee name
	08/16/2023	Bastrop Convention Center
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,385.00	1408 B Chestnut Street
		Bastrop, TX 78602
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Check if Austin, TX, officeholder living expense  B&BBQ facility rental
		Babby taling fortial
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Davies name
		Payee name  Paytron Market Place Ltd
	07/01/2023	Bastrop Market Place Ltd
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	5012 Augusta Cir
		College Station, TX 77845
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		July 2023 Lease Payment
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	07/24/2023	Bastrop Market Place Ltd
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	5012 Augusta Cir
		College Station, TX 77845
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense  August 2023 Lease Payment
		August 2023 Lease Payment
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
<u> </u>		· · · · · · · · · · · · · · · · · · ·
	Total pages Schedule F1:	
	Sch: 3/30 Rpt: 48/75	Bastrop County Republican Party 00055268
4 [	Date	5 Payee name
	09/01/2023	Bastrop Market Place Ltd
6 /	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	5012 Augusta Cir
		College Station, TX 77845
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		September 2023 Lease Payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
E	expenditure to benefit C/OI	<del>1</del>
[	Date	Payee name
	10/01/2023	Bastrop Market Place Ltd
-	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	5012 Augusta Cir
		College Station, TX 77845
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  September 2023 Lease Payment
		September 2023 Lease Payment
	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
_	2-1-	
	Date	Payee name
	11/01/2023	Bastrop Market Place Ltd
F	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	5012 Augusta Cir
		College Station, TX 77845
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		September 2023 Lease Payment
	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services	Salaries	s/Wage	es/Contract Labor	/Contract Labor OTHER (enter a category not listed above)		
					iide explains how to d	compl	lete this form.			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 4/30 Rpt: 49/75		Bastrop Cou	ınty Republican	Party				00055268	
4	Date	5	Payee name							
	12/01/2023		Bastrop Mar	ket Place Ltd						
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip C	Code				
	\$1,500.00		5012 Augus	ta Cir						
			College Stat	tion, TX 77845						
8	PURPOSE	(a)	Category (Se	e Categories listed at th	ne top of this schedule)	(b)	Description			
	OF EXPENDITURE			nead/Rental Exp			Check if travel	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITORE						<b>—</b>		officeholder living	
							December 20	)23	Lease Payı	ment
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Office so	ought	İ		Office h	eld
	experialiture to beliefit C/Oi									
	Date		Payee name							
	09/29/2023		Billy's BBQ							
	Amount (\$)		Payee addres	ss; City;	State; Zip C	Code				
	\$3,923.02		110 Highwa	y 71 W						
			Bastrop, TX	78602						
	PURPOSE	(a)	-	e Categories listed at th	4 445: 15 41-10	(b)	<b>)</b> Description			
	OF	(")		e Categories listed at tr Fundraising Exp		(~)		outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE		Solicitation	unuluising Exp	CHSC		Check if Austin	, TX,	officeholder living	g expense
							BBQ			
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office so	ought	İ		Office h	eld
	expenditure to benefit C/OI	Н								
	Date		Payee name							
	11/02/2023		Bluebonnet	Electric						
	Amount (\$)		Payee addres	ss; City;	State; Zip C	Code				
	\$85.48		PO Box 240	1						
			Giddings, T	X 78942-0240						
	PURPOSE	(a)	Category (Se	e Categories listed at th	ne top of this schedule)	(b)	Description			
	OF EXPENDITURE			nead/Rental Exp			Check if travel	outsi	de of Texas. Com	nplete Schedule T.
	EXPENDITURE							, TX,	officeholder living	g expense
							Utilities			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Office	ceholder name	Office so	ought			Office h	eld
L	CAPETIGITATE TO DETICITE C/OI									

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
sing Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/30 Rpt: 50/75	Bastrop County Republican Party 00055268
4	Date	5 Payee name
	12/01/2023	Bluebonnet Electric
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$120.83	PO Box 240
		Giddings, TX 78942-0240
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Utilities
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	09/26/2023	Casa Chapala
	Amount (\$)	Payee address; City; State; Zip Code
	\$324.75	1800 Walnut St.
		Bastrop, TX 78602
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Liquor Catering
		Eiquoi Gatering
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>y</b>
F	Date	Payee name
	09/26/2023	Dollar Tree
H	Amount (\$)	Payee address; City; State; Zip Code
	\$8.12	439 W Hwy 71
		·
		Bastrop, TX 78602-3831
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
nse Event Expense Loan Repayment/Reimbu

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 6/30 Rpt: 51/75	Bastrop County Republican Party 00055268	
4	Date	5 Payee name	
	09/10/2023	Elgin Chamber of Commerce	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$25.00	114 Central Avenue	
		Elgin, TX 78621	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Western Days	
		Western Bays	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
3	expenditure to benefit C/O		
	Date	Г _	=
	Date	Payee name	
	11/01/2023	Elgin Main Street Board	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$30.00	P.O. Box 591	
		Elgin, TX 78621	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Hogeye Festival	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
			_
	Date	Payee name	
	10/06/2023	G & C Printing	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$199.09	4125 FM 535	
		Bastrop, TX 78602	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Solicitation/Fundraising Expense	
	LAFENDITORE	Check if Austin, TX, officeholder living expense	
		G & C Printing - Programs	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	experialitate to betterit 6/01	<u> </u>	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/30 Rpt: 52/75	Bastrop County Republican Party 00055268
4	Date	5 Payee name
	10/10/2023	G & C Printing
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$60.58	4125 FM 535
		Bastrop, TX 78602
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Donor envelopes
		Bollot Clivelopes
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$	Date	Dougo nama
		Payee name
	10/06/2023	HEB Grocery
	Amount (\$)	Payee address; City; State; Zip Code
	\$215.93	104 Hasler Blvd
		Bastrop, TX 78602
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  HEB-napkins, plates, cakes, etc.
		Fied-fiapkins, plates, cakes, etc.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	D
	Date 10/06/2023	Payee name HEB Grocery
	Amount (\$)	Payee address; City; State; Zip Code
	\$98.88	104 Hasler Blvd
L		Bastrop, TX 78602
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense
		☐ Check if Austin, TX, officeholder living expense  HEB-napkins, plasticeware, etc.
		neb-liapkilis, piasticewale, etc.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
	Sch: 8/30 Rpt: 53/75	Bastrop County Republican Party 00055268			
4	Date	5 Payee name			
	10/06/2023	HEB Grocery			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$40.01	104 Hasler Blvd			
		Bastrop, TX 78602			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense  Heb-water, plasticware, etc.			
		rieb-water, plastieware, etc.			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
9	expenditure to benefit C/O				
$\vdash$	Date	Payee name			
	11/16/2023	HEB Grocery			
		•			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$53.57	104 Hasler Blvd			
		Bastrop, TX 78602			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense			
		· · · · · · · · · · · · · · · · · · ·			
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	•			
_	Date	Payee name			
	10/06/2023	Hobby Lobby			
$\vdash$	Amount (\$)	Payee address; City; State; Zip Code			
	\$16.22	779 Hwy 71 W			
	Ψ10.22	TTO TIWY TE VV			
		Bastrop, TX 78602			
	DUDDOCE	<u> </u>			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Solicitation/Fundraising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Solicitation/Fundraising Expense			
		Hobby Lobby - envelopes			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OH					

#### SCHEDULE F1

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	,
1 Total pages Schedule F1: Sch: 9/30 Rpt: 54/75	Bastrop County Republican Party  00055268
4 Date	5 Payee name
10/06/2023	Hobby Lobby
<b>6</b> Amount (\$) \$29.83	7 Payee address; City; State; Zip Code 779 Hwy 71 W  Bastrop, TX 78602
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Solicitation/Fundraising Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense  Hobby Lobby - envelopes
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/06/2023	Hobby Lobby
Amount (\$)	Payee address; City; State; Zip Code
\$400.50	779 Hwy 71 W
	Bastrop, TX 78602
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Solicitation/Fundraising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Reimburse for B&BBQ expenses
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/09/2023	Hobby Lobby
Amount (\$)	Payee address; City; State; Zip Code
\$23.27	779 Hwy 71 W
	Bastrop, TX 78602
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Bastrop Parade float - small flags
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 10/30 Rpt: 55/75	Bastrop County Republican Party 00055268				
4	Date	5 Payee name				
	09/16/2023	JL Wilkinson Consulting, LLC				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$753.02	485 Lee Road 781				
		Valley, AL 36854				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense  Speaker cost reimbursement				
		Speaker doct remisereement				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O					
	Date	Payee name				
	09/29/2023	JL Wilkinson Consulting, LLC				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$3,651.56	485 Lee Road 781				
	•					
		Valley, AL 36854				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Solicitation/Fundraising Expense				
	EXPENDITORE	Check if Austin, TX, officeholder living expense				
		Speaker costs (reimbursement)				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OH					
	Date	Payee name				
	09/26/2023	Jean Lang Catering				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$240.00	315 KC Drive				
	ΨΞ.0.00					
		Bastrop, TX 78602				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF	Solicitation/Fundraising Expense  Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		Service workers				
	0 1. 0					
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held				

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/30 Rpt: 56/75	Bastrop County Republican Party 00055268
4	Date	5 Payee name
	11/28/2023	Lost Pines Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$480.00	PO Box 575
		Bastrop, TX 78602
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Two tables
		1 WO tables
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
"	expenditure to benefit C/O	
⊨	Data	
	Date	Payee name MailChimp
L	07/24/2023	MailChimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$42.11	c/o The Rocket Science Group LLC
		675 Ponce de Leon Ave NE Suite 5000
		Atlanta, GA 30308
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Monthly charges
		montally ondiges
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	•
H	Date	Payee name
	08/23/2023	MailChimp
H	Amount (\$)	Payee address; City; State; Zip Code
	\$42.11	c/o The Rocket Science Group LLC
		675 Ponce de Leon Ave NE Suite 5000
		Atlanta, GA 30308
┝	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Monthly charges
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/Ol	<u> </u>

#### SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By
Conditions/ Officerbolder/Political

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense Legal Services  The Instruction Guide explains I		ages	/Contract Labor	Travel Out of Dist OTHER (enter a	trict category not listed above)
1	Total nagge Schodule F1:	2	<u> </u>		_		Filer ID	(Ethics Commission Filers)
	Total pages Schedule F1: Sch: 12/30 Rpt: 57/75	Ĺ	Bastrop County Republican Party			l -	00055268	(Eurica Commission Filera)
4	Date	5	Payee name					
	09/23/2023		MailChimp					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de			
	\$42.11		c/o The Rocket Science Group LLC					
			675 Ponce de Leon Ave NE Suite 5000	)				
			Atlanta, GA 30308					
8	PURPOSE	(a)	Category (See Categories listed at the top of this scho	edule)	(b)	Description		
	OF EXPENDITURE		Advertising Expense	,		Check if travel outside	e of Texas. Comp	olete Schedule T.
	EXPENDITORE					Check if Austin, TX, o	officeholder living	expense
						Monthly charges		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	ght		Office he	ld
		_						
	Date		Payee name					
	10/23/2023		MailChimp					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$42.11		c/o The Rocket Science Group LLC					
			675 Ponce de Leon Ave NE Suite 5000	)				
			Atlanta, GA 30308					
	PURPOSE	(a)	Category (See Categories listed at the top of this scho	edule)	(b)	Description		
	OF		Advertising Expense			Check if travel outside	e of Texas. Comp	olete Schedule T.
	EXPENDITURE		<b>5</b> .			Check if Austin, TX, o	officeholder living	expense
						Monthly charges		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office sou	ght		Office he	ld
	Date		Payee name					
L	11/23/2023	L	MailChimp					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$42.11		c/o The Rocket Science Group LLC					
			675 Ponce de Leon Ave NE Suite 5000	)				
			Atlanta, GA 30308					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	OF EXPENDITURE		Advertising Expense			Check if travel outside		
	_/, _,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					Check if Austin, TX, o	officeholder living	expense
						Monthly charges		
	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name C	Office sou	aht		Office he	ld
	expenditure to benefit C/O		Carried Constitution Constituti		J. 10		2.1100 110	· <del></del>

#### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/30 Rpt: 58/75	Bastrop County Republican Party 00055268
4	Date	5 Payee name
	07/01/2023	McCoys Building Supply
6	Amount (\$) \$24.97	7 Payee address; City; State; Zip Code 801 W Hwy 71 Service Rd
		Bastrop, TX 78602
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Shelving
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/17/2023	Momentive Inc
	Amount (\$) \$372.04	Payee address; City; State; Zip Code One Curiosity Way
		San Mateo, CA 94403
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Web Hosting for one year
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/15/2023	Morning Star Publishing
	Amount (\$) \$685.20	Payee address; City; State; Zip Code 159 Dickerson Ln
		Elgin, TX 78621
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Tumblers
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 14/30 Rpt: 59/75	Bastrop County Republican Party 00055268				
4	Date	5 Payee name				
	10/06/2023	Morning Star Publishing				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$56.52	159 Dickerson Ln				
		Elgin, TX 78621				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Solicitation/Fundraising Expense				
	EXPENDITORE	Check if Austin, TX, officeholder living expense				
		Tumblers - sales tax				
_						
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
	Date	Payee name				
	12/30/2023	Morning Star Publishing				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$45.00	159 Dickerson Ln				
		Elgin, TX 78621				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Solicitation/Fundraising Expense				
		Check if Austin, TX, officeholder living expense				
		Hats (2)				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/Ol					
	Data					
	Date 08/16/2023	Payee name  Nayelli Charcuterie				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$385.00	US290				
		McDade, TX 78650				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)				
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
		Hors d'oevres				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·				

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/30 Rpt: 60/75	Bastrop County Republican Party 00055268
4	Date	5 Payee name
	08/16/2023	Off Duty Management
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$974.04	1906 Avenue D
		Suite #200
		Katy, TX 77493
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Security (reimbursment)
		Security (reimbursment)
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	09/26/2023	Pilger, Adren
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	317 McNair St.
		Navasota, TX 77868
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Reimburse auctioneer expense
		Treimbarse additioned expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	10/06/2023	Post Office
	Amount (\$)	Payee address; City; State; Zip Code
	\$396.00	1106 Main St
		Bastrop, TX 78602
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Post Office - Stamps
		Fost Office - Stamps
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/30 Rpt: 61/75	Bastrop County Republican Party 00055268
4	Date	5 Payee name
	11/02/2023	Post Office
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$7.14	1106 Main St
		Bastrop, TX 78602
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Postage
		F Ostage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Date	David and the second
	09/16/2023	Payee name
		Quicken Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.82	3760 Haven Av
		Menlo Park, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Accounting Software for One Year
		Accounting Software for one Tear
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Data	Davida marra
	Date 07/11/2023	Payee name  Popublican Party of Toyas
		Republican Party of Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$199.00	807 Brazos St
		Suite 701
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Chair membership Fee
		Chail membership Fee
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		

#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/30 Rpt: 62/75	Bastrop County Republican Party 00055268
4	Date	5 Payee name
	07/06/2023	Spectrum Business
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$120.50	4145 S. Falkenburg Rd.
		Riverview, FL 33578-8652
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Monthly usage
		Worlding usage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
F	Date	Payee name
	08/05/2023	Spectrum Business
H	Amount (\$)	Payee address; City; State; Zip Code
	\$120.50	4145 S. Falkenburg Rd.
		Riverview, FL 33578-8652
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Monthly usage
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
F	Date	Payee name
	09/05/2023	Spectrum Business
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$120.50	4145 S. Falkenburg Rd.
		Riverview, FL 33578-8652
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Monthly usage
		Worthing asage
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/O	
$\vdash$		
ı		

#### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/30 Rpt: 63/75	Bastrop County Republican Party 00055268
4	Date	5 Payee name
	10/06/2023	Spectrum Business
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$120.50	4145 S. Falkenburg Rd.
		Riverview, FL 33578-8652
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Monthly usage
		Worldiny daage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/OI	
	Date	Payso nama
	11/05/2023	Payee name Spectrum Business
	Amount (\$) \$120.50	Payee address; City; State; Zip Code 4145 S. Falkenburg Rd.
	Ψ120.30	4143 S. Faikenburg Na.
		Diversion, EL 22570 0652
		Riverview, FL 33578-8652
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Monthly usage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	12/06/2023	Spectrum Business
	Amount (\$)	Payee address; City; State; Zip Code
	\$120.50	4145 S. Falkenburg Rd.
		Riverview, FL 33578-8652
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Monthly usage
	Complete ONLY if direct	Candidate/Officeholder name Office county Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

	Credit Card Payment		The Instruction Guide explains how to con	nple	ete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 19/30 Rpt: 64/75		Bastrop County Republican Party		00055268
4	Date	5	Payee name		
	07/28/2023		Square Inc		
6	Amount (\$)	7	Payee address; City; State; Zip Coo	de	
	\$43.80		1455 Market St		
			Suite 600		
			San Francisco, CA 94103		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Fees		Check if travel outside of Texas. Complete Schedule T.
					Check if Austin, TX, officeholder living expense  Square
					oqua. s
9	Complete ONLY if direct	<u> </u>	L Candidate/Officeholder name Office soug	aht	Office held
	expenditure to benefit C/O	Н		, -	
_	Date	Т	Payee name		
	07/30/2023		Square Inc		
	Amount (\$)	╁	Payee address; City; State; Zip Coo	de	
	\$3.20		1455 Market St		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Suite 600		
			San Francisco, CA 94103		
	PURPOSE	(0)	No.	(h)	Description:
	OF	رم <sub>.</sub>	Category (See Categories listed at the top of this schedule)  Fees	(D)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		rees		Check if Austin, TX, officeholder living expense
					Square
	Complete ONLY if direct		Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/OI	П			
	Date		Payee name		
	08/01/2023		Square Inc		
	Amount (\$)		Payee address; City; State; Zip Coo	de	
	\$6.10		1455 Market St		
			Suite 600		
			San Francisco, CA 94103		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Fees		Check if travel outside of Texas. Complete Schedule T.
					Check if Austin, TX, officeholder living expense
					Square
L	Complete ONLY if direct	Ц,	Candidate/Officeholder name Office soug	ıht	Office held
	expenditure to benefit C/O		Sandidate/Officeriolider flame Office Soug	ji IL	Office field

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 20/30 Rpt: 65/75	FILER NAME     Bastrop County Republican Party	3 Filer ID (Ethics Commission Filers) 00055268
4	Date 08/10/2023	5 Payee name Square Inc	
	Amount (\$) \$6.10	7 Payee address; City; State; Zip Code 1455 Market St Suite 600 San Francisco, CA 94103	
8	PURPOSE OF EXPENDITURE		vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 08/13/2023	Payee name Square Inc	
	Amount (\$) \$6.10	Payee address; City; State; Zip Code 1455 Market St Suite 600 San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE	1 1 663	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 08/15/2023	Payee name Square Inc	
	Amount (\$) \$6.10	Payee address; City; State; Zip Code 1455 Market St Suite 600 San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE	1 003	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

#### SCHEDULE F1

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

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

	Credit Card Payment	The Instruction Guide explains how to cor	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 21/30 Rpt: 66/75	Bastrop County Republican Party		00055268
4	Date	5 Payee name		•
	08/20/2023	Square Inc		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$3.20	1455 Market St		
		Suite 600		
		San Francisco, CA 94103		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Square
L				
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office souç	ght	Office held
	Date	Payee name		
	08/21/2023	Square Inc		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$29.30	1455 Market St		
		Suite 600		
		San Francisco, CA 94103		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense
				Square
_	Complete ONLY if direct	Candidate/Officeholder name Office sou	ht	Office held
	expenditure to benefit C/OI		JIIL	Office field
_	Dete			
	Date 08/23/2023	Payee name		
		Square Inc		
	Amount (\$)	Payee address; City; State; Zip Cor	de	
	\$9.30	1455 Market St		
		Suite 600		
		San Francisco, CA 94103		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Square
H	Complete ONLY if direct	Candidate/Officeholder name Office sou	ht	Office held
	expenditure to benefit C/OI	•	٠٠٠٠	Since Held

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By Contributions/ Officials India Committee
Graduates/Officials India Committee

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/30 Rpt: 67/75	Bastrop County Republican Party 00055268
4	Date	5 Payee name
	08/27/2023	Square Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$41.50	1455 Market St
		Suite 600
		San Francisco, CA 94103
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Square
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
	Date	Payee name
	08/28/2023	Square Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.75	1455 Market St
		Suite 600
		San Francisco, CA 94103
	PURPOSE	(a) a
	OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule 1.  Check if Austin, TX, officeholder living expense
		Square
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	08/29/2023	Square Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$29.30	1455 Market St
		Suite 600
		San Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Square
	Commission ONE V. C. C.	Condidate/Officeholder name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

l	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 23/30 Rpt: 68/75	2 FILER NAME Bastrop County Republican Party 3 Filer ID (Ethics Commission Filers) 00055268
4		5 Payee name Square Inc
	Amount (\$) \$4.65	7 Payee address; City; State; Zip Code 1455 Market St Suite 600 San Francisco, CA 94103
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Square
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 09/03/2023	Payee name Square Inc
	Amount (\$) \$4.65	Payee address; City; State; Zip Code  1455 Market St  Suite 600  San Francisco, CA 94103
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Square
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 09/04/2023	Payee name Square Inc
	Amount (\$) \$6.85	Payee address; City; State; Zip Code 1455 Market St Suite 600 San Francisco, CA 94103
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Square
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/30 Rpt: 69/75	Bastrop County Republican Party 00055268
4	Date	5 Payee name
	09/05/2023	Square Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6.10	1455 Market St
		Suite 600
		San Francisco, CA 94103
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Square
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	09/06/2023	Square Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$33.95	1455 Market St
		Suite 600
		San Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Square
		Square
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	09/10/2023	Square Inc
	Amount (\$)	•
	\$6.10	Payee address; City; State; Zip Code  1455 Market St
	Φ0.10	
		Suite 600
		San Francisco, CA 94103
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Square
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this fo	orm.
1	Total pages Schedule F1: Sch: 25/30 Rpt: 70/75	FILER NAME  Bastrop County Republican Party	3 Filer ID (Ethics Commission Filers) 00055268
4	Date 09/11/2023	Payee name Square Inc	I
6	Amount (\$) \$10.75	Payee address; City; State; Zip Code 1455 Market St Suite 600 San Francisco, CA 94103	
8	PURPOSE OF EXPENDITURE	1 000	k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 09/12/2023	Payee name Square Inc	
	Amount (\$) \$13.95	Payee address; City; State; Zip Code 1455 Market St Suite 600 San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE	1 003	k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 09/13/2023	Payee name Square Inc	
	Amount (\$) \$3.20	Payee address; City; State; Zip Code 1455 Market St Suite 600 San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE	1 663	k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 26/30 Rpt: 71/75	Bastrop County Republican Party 00055268
4	Date	5 Payee name
	09/14/2023	Square Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4.65	1455 Market St
		Suite 600
		San Francisco, CA 94103
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Square
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	- CAPCHARLATO TO SOTIONE GFO	
	Date	Payee name
	09/17/2023	Square Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.65	1455 Market St
		Suite 600
		San Francisco, CA 94103
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Square
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/17/2023	Square Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.40	1455 Market St
		Suite 600
		San Francisco, CA 94103
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Square
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

#### SCHEDULE F1

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

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

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

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 27/30 Rpt: 72/75	Bastrop County Republican Party 00055268
4	Date	5 Payee name
	09/19/2023	Square Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$21.20	1455 Market St
		Suite 600
		San Francisco, CA 94103
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Square
_	Commission ONII V if disposit	Condidate/Officeholder name
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_		
	Date	Payee name
	09/20/2023	Square Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$18.68	1455 Market St
		Suite 600
		San Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Square
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/21/2023	Square Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.53	1455 Market St
	¥65	Suite 600
		San Francisco, CA 94103
	DUDDOCE	(-)
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Square
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

#### SCHEDULE F1

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

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

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

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

	Credit Card Payment	The Instruction Guide explains how to com	plete	e this form.
1	Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
	Sch: 28/30 Rpt: 73/75	Bastrop County Republican Party		00055268
4	Date	5 Payee name		
L	09/21/2023	Square Inc		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
l	\$431.22	1455 Market St Suite 600		
l				
Ļ		San Francisco, CA 94103		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Fees	D) [ П	Description  Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	1 663	Ė	Check if Austin, TX, officeholder living expense
l			S	Square
Ļ				
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sough	nt	Office held
┡	· 			
l	Date	Payee name		
L	10/04/2023	Square Inc		
l	Amount (\$)	Payee address; City; State; Zip Code	е	
l	\$3.48	1455 Market St		
l		Suite 600		
L		San Francisco, CA 94103		
l	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	b) [ T	Description  Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Fees	Ė	Check if Austin, TX, officeholder living expense
l			5	Square
L				
l	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt	Office held
L	- Composition to bostom Group			
l	Date	Payee name		
L	11/01/2023	Square Inc		
l	Amount (\$)	Payee address; City; State; Zip Code	е	
l	\$29.30	1455 Market St		
l		Suite 600		
		San Francisco, CA 94103		
l	PURPOSE OF	, -	b) [	Description  Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Fees	ŀ	Check if days outside of Texas. Complete Schedule 1.  Check if Austin, TX, officeholder living expense
l			5	Gquare Fees
L				
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
L	expenditure to benefit C/Ol	1		
_				

#### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:						
	Sch: 29/30 Rpt: 74/75	Bastrop County Republican Party 00055268					
4	Date	5 Payee name					
	07/03/2023	Walmart					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$9.14	488 Highway 71 W					
		Bastrop, TX 78602					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense  Toilet paper					
		ι οποί ραροί					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
9	expenditure to benefit C/O						
_							
	Date	Payee name					
	09/10/2023	Walmart					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$31.91	488 Highway 71 W					
		Bastrop, TX 78602					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense  Western Days					
		WESIEIII Days					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						
	Date	Payee name					
	09/15/2023	Walmart					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$61.65	488 Highway 71 W					
		Bastrop, TX 78602					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.					
	EXI ENDITORE	Check if Austin, TX, officeholder living expense					
		Water					
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held					

#### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	_
	Sch: 30/30 Rpt: 75/75	Bastrop County Republican Party 00055268	
4	Date	5 Payee name	_
	10/06/2023	Walmart	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$5.50	488 Highway 71 W	
		Bastrop, TX 78602	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
		Check if Austin, TX, officeholder living expense Binder for James	
		billuel for James	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
"	expenditure to benefit C/O		
-	Data		_
	Date	Payee name	
	10/06/2023	Walmart	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$62.70	488 Highway 71 W	
		Bastrop, TX 78602	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  External harddrive	
		External naturalive	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
_	Date	Pouce name	_
	12/09/2023	Payee name  Walmart	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$31.63	488 Highway 71 W	
		Bastrop, TX 78602	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Bastrop Parade Float - garlands	
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
-			_
l			